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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American College of Radiology Association Political Action Committee 1891 Preston White Drive ADDRESS (number and street) Check if different than previously Reston ٧A 20191 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE A CITY A IS THIS NEW **AMENDED** C00343459 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 06 0 1 2009 06 3 0 2009 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. DR William Herrington Type or Print Name of Treasurer Electronically Filed by DR William Herrington 07 20 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) 2/115

Write or Type Committee Name American College of Radiology Association Political Action Committee D D [®]D 06 0 1 2009 0.6 3 0 2009 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009° 336659.40 January 1 (b) Cash on Hand at 553729.97 Begining of Reporting Period 57322.32 654755.64 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 611052.29 991415.04 6(a) and 6(c) for Column B) 123575.56 503938.31 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 487476.73 487476.73 (subtract Line 7 from Line 6(d)) Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 115

Write or Type Committee Name

American College of Radiology Association Political Action Committee

Report Covering the Period:

From:

D D 1

2009

o. 06

D D 3 0

3 0 Y

^Y 2009

I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	53729.71	560836.73
	(ii) Unitemized	3551.38	90773.91
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	57281.09	651610.64
((b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	57281.09	651610.64
	Transfers From Affiliated/Other Party Committees	0.00	0.00
3. /	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
((Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
t	to Federal candidates and Other Political Committees	0.00	2500.00
	Other Federal Receipts (Dividends, Interest, etc.)	41.23	645.00
	Transfers from Non-Federal and Levin Funds		
((a) Non-Federal Account (from Schedule H3)	0.00	0.00
((b) Levin Funds (from Schedule H5)	0.00	0.00
((c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	Fotal Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	57322.32	654755.64
	Fotal Federal Receipts subtract Line 18(c) from Line 19)	57322.32	654755.64

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 115

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Operating Expenditures: (a) Shared Federal/Non-Feder 		
Activity (from Schedule H4		0.00
(i) Federal Share		0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	0.00	1050.00
Expenditures		1950.00
(c) Total Operating Expenditur (add 21(a)(i), (a)(ii) and (b)		1950.00
2. Transfers to Affiliated/Other Par	ty	
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees.	123000.00	492500.00
and Other Political Committees. Independent Expenditure		
(use Schedule E)		0.00
 Coordinated Expenditures Made Committees (2 U.S.C. 441a(d)) (use Schedule F) 	0.00	0.00
(use Schedule F)		
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
8. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	3476.66
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)		0.00
(d) Total Contribution Refunds	0.00	3476.66
(add Lines 28(a), (b), and (c))	0176.00
9. Other Disbursements	575.56	6011.65
Federal Election Activity (2 U.S.	C 431(20))	
(a) Shared Federal Election Ac		
(from Schedule H6)	0.00	0.00
(i) Federal Share		0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Pa	id Entirely	0.00
With Federal Funds	0.00	0.00
(c) Total Federal Election Activ Lines 30(a)(i), 30(a)(ii) an	7. 0.00	0.00
1. Total Disbursements (add Line	s 21(c), 22,	
23, 24, 25, 26, 27, 28(d), 29 ar	100=== =0	503938.31
Total Federal Disbursements (authtract Line 21(a)(ii) and Line	230(a)(ii)	
(subtract Line 21(a)(ii) and Line from Line 31)	123575.56	503938.31
HOITI LING OT/	120070.00	303330.31

DETAILED SUMMARY PAGE

of Disbursements

5 / 115

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	57281.09	651610.64
34.	Total Contribution Refunds (from Line 28(d))	0.00	3476.66
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	57281.09	648133.98
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	1950.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	1950.00

FE6AN026

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any not the name and address of any political committee	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Jelinek Mailing Address Washington Hosp 110 Irving St NW City Washington		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer	Occupation	45.00
Center Radiology Receipt For: Primary General Other (specify) ▼	Diagnostic Radiologist Aggregate Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle Initial) Dr. Nicholas Manuel Mailing Address 139 Kincaid Ln	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	Transaction ID: 30083062	
Boyce	State Zip Code LA 71409-9626	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Garry Simons, III	Date of Receipt	
Mailing Address 726 Latrobe Way	06 11 2009	
City	State Zip Code	Transaction ID: 30245302
Macon	GA 31220-7622	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiology Associates of Macon Receipt For:	Occupation Diagnostic Radiologist	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optio		1045.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/115 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Alan Hillard			Date of Receipt
Mailing Address 1904 S Fairview Rd			06 11 2009
City Columbia	State MO	Zip Code 65203-4741	Transaction ID: 30245304 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Columbia Radiology Ltd.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Janet Storella			Date of Receipt
Mailing Address 6515 Fallwind Ln	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State MD	Zip Code	Transaction ID: 30246385
Bethesda FEC ID number of contributing federal political committee.	C	20817-4941	Amount of Each Receipt this Period 40.00
Name of Employer Drs Grover, Christie & Me- rritt	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		440.00	
Full Name (Last, First, Middle Initial) Dr. Andrew Osiason			Date of Receipt
Mailing Address 506 Julie Ct			06 11 2009
City	State	Zip Code	Transaction ID: 30246386
Wyckoff FEC ID number of contributing federal political committee.	NJ C	07481-1101	Amount of Each Receipt this Period 38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 461.52	
SUBTOTAL of Receipts This Page (optional	l)		328.46

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 115 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Arthur S. Albert Mailing Address 124 W 60th St Apt City New York FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group	State Zip Code NY 10023-7451 C Occupation Diagnostic Radiologist	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	
Full Name (Last, First, Middle Initial) Dr. Harry Agress, JR Mailing Address Hackensack Unive 30 Prospect Ave City Hackensack FEC ID number of contributing	State Zip Code NJ 07601-1914	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 461.52	38.46
Full Name (Last, First, Middle Initial) Dr. Adam Bogomol Mailing Address 50 W 72nd St Apt	1509	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City New York FEC ID number of contributing federal political committee.	State Zip Code NY 10023-4132 C	Transaction ID: 30246389 Amount of Each Receipt this Period 38.46
Name of Employer Hackensack Radiology Group Receipt For: Primary General	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 461.52	
Other (specify) ▼ SUBTOTAL of Receipts This Page (options	al)	115.38

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9/115 (check only one)	
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American College of Radiology As:	sociation Politic	al Action Committee		
Full Name (Last, First, Middle Initial) Dr. Hiten Magan Malde			Date of Receipt	
Mailing Address 7 Kinkaid Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Closter	State NJ	Zip Code 07624-2908	Transaction ID: 30246391 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	07024 2300	38.46	
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52		
Full Name (Last, First, Middle Initial) Dr. George Joseph Ferrone	l .		Date of Receipt	
Mailing Address 440 E 62nd St Apt	06 11 2009			
City New York	State NY	Zip Code 10065-8345	Transaction ID: 30246392	
FEC ID number of contributing federal political committee.	C	10005-8545	Amount of Each Receipt this Period 38.46	
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 461.52		
Full Name (Last, First, Middle Initial) Dr. Sean D. Pierce			Date of Receipt	
City Long Island City	State NY	Zip Code 11101-5604	Transaction ID: 30246393 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	11101 3004	38.46	
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 461.52		
SUBTOTAL of Receipts This Page (optional	al)		115.38	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 115 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Asset	d Statements may not be sold or used by any personant the name and address of any political committee to ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Mitchell Miller Mailing Address 2 Constitution Ct Ap City Hoboken FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y O 6 1 1 1 2 0 0 9 Transaction ID: 30246394 Amount of Each Receipt this Period 38.46
Full Name (Last, First, Middle Initial) Dr. Rita S. Patel Mailing Address 3 Ware Rd City Upper Saddle River FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)	State Zip Code NJ 07458-1919 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 461.52	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Robert Krugman Mailing Address 10 Lexington Ct City Englewood FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)	State Zip Code NJ 07631-3081 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 423.06	Date of Receipt M M / D D / Y Y Y Y Y O 6 1 1 1 2 0 0 9 Transaction ID: 30246398 Amount of Each Receipt this Period 38.46
SUBTOTAL of Receipts This Page (optional))	115.38

	LE A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 115 (check only one) X 11a
or for commerc	n copied from such Reports and ial purposes, other than using the COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	College of Radiology Association	ciation Politic	al Action Committee	
Dr. Kavita Pa				Date of Receipt
Mailing Add	ress 52 Oxford Lndg	01-1-	7'. 0.4.	06 11 2009
City <u>Wee</u> hawk	en	State NJ	Zip Code 07086-6650	Transaction ID: 30246399 Amount of Each Receipt this Period
FEC ID nun	nber of contributing ical committee.	C	1 1 1 1 1	38.46
Name of En Hackensac	nployer k Radiology Group	Occupation Diagnost	n tic Radiologist	
Receipt For Prima Other		Aggregate	e Year-to-Date ▼ 230.76	
Dr. John Del		<u> </u>		Date of Receipt
Mailing Add	Mailing Address 18 Baldwin Rd			0 6 1 1 2 0 0 9
City		State	Zip Code	Transaction ID: 30246400
Saddle Ri		NJ	07458-3203	Amount of Each Receipt this Period
federal polit	nber of contributing ical committee.	C		38.46
	k Rádiology Group	Occupation Diagnost	_n tic Radiologist	
Receipt For Prima		Aggregate	e Year-to-Date ▼ 461.52	
Full Name (Last, First, Middle Initial) oth			Date of Receipt
Mailing Add	ress 201 E 80th St Apt 8F			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City New York		State NY	Zip Code	Transaction ID: 30246401
FEC ID nun	nber of contributing ical committee.	C	10021-0515	Amount of Each Receipt this Period 38.46
Name of En Hackensac	nployer k Radiology Group	Occupation	n tic Radiologist	
Receipt For Prima Other		_ ' 	e Year-to-Date ▼ 461.52	
SUBTOTAL of	of Receipts This Page (optional)	1		115.38
TOTAL This	Period (last page this line numbe	er only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any perso the name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Joel Rakow Mailing Address 505 Ivy Lane City Wyckoff FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General	State Zip Code NJ 07481-1072 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. David Panush Mailing Address 538 E 84th St Apt 4 City New York FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General	State Zip Code NY 10028-7357 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 461.52	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Gail Starr Mailing Address Hackensack Univers 20 Prospect Ave Ste City Hackensack FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)	sity Med Ctr	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	96.15

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 115 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Association	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠	Full Name (Last, First, Middle Initial) Dr. William Kim Mailing Address 405 Golf Course Dr City Leonia FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group	State NJ C		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Receipt For: Primary General Other (specify)	,	tic Radiologist e Year-to-Date ▼ 211.53	
3.	Full Name (Last, First, Middle Initial) Dr. Gregory Nicola Mailing Address 101 W End Ave Apt 16	БН		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 30246407
	New York FEC ID number of contributing federal political committee.	C	10023-6337	Amount of Each Receipt this Period 19.23
	Name of Employer Hackensack Radiology Group	Occupation	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 211.53	
- ;.	Full Name (Last, First, Middle Initial) Dr. Clement Yang	l		Date of Receipt
	Mailing Address 555 W 59th St Apt 198	06 11 2009		
	City	State	Zip Code	Transaction ID: 30246408
	New York	NY	10019-1006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		19.23
	Name of Employer Hackensack Radiology Group	Occupation Diagnos	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 211.53	
	SUBTOTAL of Receipts This Page (optional)			57.69
	TOTAL This Period (last page this line number	only)	1	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 115 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any perso dress of any political committee to	
American College of Radiology Associ	iation Politica	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Margaret Emy			Date of Receipt
Mailing Address 245 Oxford Dr			06 11 2009
City	State	Zip Code	Transaction ID: 30246410
<u>Tenafly</u>	NJ	07670-3117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 211.53	1
Full Name (Last, First, Middle Initial) Dr. Sunitha Sunkavalli			Date of Receipt
Mailing Address 943 High Mountain Rd			06 11 2009
City	State	Zip Code	Transaction ID: 30246411
Franklin Lakes	NJ	07417-1619	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	
Full Name (Last, First, Middle Initial) Dr. Gene Han	1		Date of Receipt
Mailing Address 24 Briarcliff Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 30246413
Tenafly	NJ	07670-2902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	
SUBTOTAL of Receipts This Page (optional)			57.69

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per he name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
American College of Radiology Asso	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Joel Budin Mailing Address 140 Chestnut St		Date of Receipt
Maining Address 140 Chestilut St		06 11 2009
City	State Zip Code	Transaction ID: 30246414
Englewood	NJ 07631-3033	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	16.03
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 259.65	
Full Name (Last, First, Middle Initial) Dr. Gregory Boys		Date of Receipt
Mailing Address South Texas Radiolo PO Box 29441	gy Group	06 11 2009
City	State Zip Code	Transaction ID: 30246443
San Antonio FEC ID number of contributing federal political committee.	TX 78229-0441	Amount of Each Receipt this Period 500.00
Name of Employer South Texas Radiology Gro- up	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. James S. Gilley		Date of Receipt
Mailing Address South Texas Radiolo 8401 Datapoint Dr S		06 11 2009
City	State Zip Code	Transaction ID: 30246444
San Antonio	TX 78229-5907	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		1516.03

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 115 (check only one) X 11a
A oi	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Association	ciation Politic	cal Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. W Lawrence Greif			Date of Receipt
	Mailing Address 130 Box Oak		7: 0 1	06 11 2009
	City San Antonio	State TX	Zip Code 78230-5628	Transaction ID: 30246446 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1300.00
	Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
— В.	Full Name (Last, First, Middle Initial) Dr. Michael Theobald Mailing Address 457 Devils Ln	1		Date of Receipt
		01-1-	7'- 0-1-	06 12 2009
	City Naples	State FL	Zip Code 34103-3019	Transaction ID: 30248266 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	400.00
	Name of Employer Naples Radiologists	Occupation Diagnos	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
 C.	Full Name (Last, First, Middle Initial) Dr. Heather Pearlman	1		Date of Receipt
	Mailing Address 2929 Fantasy Ln			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 30248268
	Decatur FEC ID number of contributing federal political committee.	GA C	30033-5818	Amount of Each Receipt this Period 500.00
	Name of Employer Northside Radiology	Occupation	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	_ '	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	1	1	2200.00
	TOTAL This Period (last page this line numbe			

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than u	is and Statements may not be sold or used by any personning the name and address of any political committee to Association Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Soehnlen Mailing Address 18882 Withrich City Dalton FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of Canton Receipt For: Primary General Other (specify)	Rd State Zip Code OH 44618-8923 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M M D D D Z D D D D D D D D D D D D D
Full Name (Last, First, Middle Initial) Dr. Gary Geil Mailing Address Heritage Medica 1100 N Tustin A City Santa Ana FEC ID number of contributing federal political committee. Name of Employer Santa Ana Tustin Radiology Group Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Thomas Poulton Mailing Address	State Zip Code OH 44710-1799 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	Date of Receipt M M M D D D Z D Q D D Z D D D D D D D D D D D
SUBTOTAL of Receipts This Page (opt	ional)	590.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 115 (check only one) X
or for	nformation copied from such Reports and St commercial purposes, other than using the AME OF COMMITTEE (In Full) merican College of Radiology Associa	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>D</u>	ull Name (Last, First, Middle Initial) r. Bradford Richmond			Date of Receipt
M	ailing Address Cleveland Clinic Found 9500 Euclid Ave	lation		06 / 15 / 2009
	ity Sleveland	State OH	Zip Code 44195-5021	Transaction ID: 30251603 Amount of Each Receipt this Period
F	EC ID number of contributing defeal political committee.	C	11100 0021	40.00
<u>O</u>	ame of Employer leveland Clinic Foundati- n eceipt For: Primary General Other (specify) ▼		n cic Radiologist e Year-to-Date ▼ 240.00	
B. <u>D</u>	ull Name (Last, First, Middle Initial) r. John Rogers lailing Address 802 West Gap Creek F	Road		Date of Receipt 0 6 1 5 2 0 0 9
C	ity	State	Zip Code	Transaction ID: 30251604
<u>G</u>	Greer	SC	29651-5065	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		42.00
N G	ame of Employer ireenville Radiology	Occupatio Diagnost	n ic Radiologist	
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	
	ull Name (Last, First, Middle Initial) r. Charles Williams, III			Date of Receipt
M	ailing Address 2117 Cleveland Street	Ext		0 6 1 5 2 0 0 9
	ity	State	Zip Code	Transaction ID: 30251605
F	Areenville EC ID number of contributing orderal political committee.	SC C	29607-3649	Amount of Each Receipt this Period 50.00
N G	ame of Employer ireenville Radiology, PA	Occupatio Diagnost	n ic Radiologist	
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
CITE	BTOTAL of Receipts This Page (optional)			132.00

SCHEDULE A	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 115 (check only one) X
or for commercial purpo	ses, other than using the name and	d address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
City Ormond Beach FEC ID number of controls	Cypress Hollow Ln State FL ontributing	e Zip Code 32174-3047	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Radiology Associate Daytona Beach Receipt For: Primary Other (specify	s of Occup Diagr Aggre General	pation nostic Radiologist gate Year-to-Date ▼ 400.00	
Full Name (Last, Fir Dr. Robert Newman Mailing Address 9	st, Middle Initial) 13 Southview PI NE		Date of Receipt 0 6 1 5 2 0 0 9
City Lenoir FEC ID number of confederal political communications.		e Zip Code 28645-3755	Transaction ID: 30251608 Amount of Each Receipt this Period 50.00
Name of Employer Lenoir Radiology Receipt For: Primary Other (specify	Aggre General	pation nostic Radiologist egate Year-to-Date ▼ 300.00	
Full Name (Last, Fir. Dr. Andrew Beloni Mailing Address 5	et, Middle Initial) 624 Laurium Rd		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Charlotte FEC ID number of cederal political communications		e Zip Code 28226-5610	Transaction ID: 30251609 Amount of Each Receipt this Period 45.00
Name of Employer Charlotte Radiology Receipt For: Primary Other (specify	General Aggre	pation nostic Radiologist gate Year-to-Date ▼ 270.00	
SUBTOTAL of Receip	ts This Page (optional)		195.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 115 (check only one) X
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Assoc	ciation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Ira Adler			Date of Receipt
	Mailing Address 1811 Bloomsbury Rd			06 15 2009
	City Greenville	State NC	Zip Code 27858-9617	Transaction ID: 30251610 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Eastern Radiologists	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	
В.	Full Name (Last, First, Middle Initial) Dr. Roger Thomas Mailing Address 1636 Anita Ln			Date of Receipt
		Ctata	7'o Codo	06 15 2009
	City Newport Beach	State CA	Zip Code 92660-4804	Transaction ID: 30251612 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Newport Harbor Radiology	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
с. С.	Full Name (Last, First, Middle Initial) Dr. Andrew Wu			Date of Receipt
	Mailing Address 8729 Valentine Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Raleigh	State NC	Zip Code 27615-5830	Transaction ID: 30251613 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	27010 0000	40.00
	Name of Employer Wake Radiology	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	
	SUBTOTAL of Receipts This Page (optional)	1		120.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE ITEMIZED R	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 115 (check only one) X
NAME OF COM	MMITTEE (In Full)			on for the purpose of soliciting contributions solicit contributions from such committee.
	Ilege of Radiology Associ	ation Politic	al Action Committee	
Dr. Terry Martin Mailing Address				Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	2090 Columbiana nu s	State	Zip Code	Transaction ID: 30251614
Birmingham		AL	35216-2152	
FEC ID numbe federal political		C	33210-2132	Amount of Each Receipt this Period
Name of Emplo Rad Assoc of E PC	yer Siirmingham	, ' 	ic Radiologist	
Receipt For: Primary Other (sp	General ecify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
Full Name (Las Dr. Kent Lancas Mailing Address				Date of Receipt
Maining / tadi oot	5 5141 Odildalice Latil			06 15 2009
City		State	Zip Code	Transaction ID: 30251616
Stevensville		MI	49127-9376	Amount of Each Receipt this Period
FEC ID number federal political		C		42.00
Name of Emplo Radiology Asso Berrie	yer ciates of	Occupation Diagnost	n ic Radiologist	
Receipt For:		Aggregate	e Year-to-Date ▼	
Primary Other (sp	☐ General ecify) ▼	0 0	252.00	
Dr. Jugesh Chee				Date of Receipt
Mailing Address	2466 Oak Bend Pl			06 15 7 2009
City		State	Zip Code	Transaction ID: 30251617
Newburgh		IN	47630-8053	Amount of Each Receipt this Period
FEC ID number federal political		C		60.00
Name of Emplo Medical Center	yer of Delaware	,	ic Radiologist	
Receipt For: Primary Other (sp	General ecify) ♥	Aggregate	e Year-to-Date ▼ 360.00	
CURTOTAL of D	eceipts This Page (optional)			202.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22/115 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Stephen Keller			Date of Receipt
Mailing Address 307 Cabin Grove Lr	า		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Saint Louis	State MO	Zip Code 63141-8171	Transaction ID: 30251618 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00141 0171	100.00
Name of Employer West County Radiological Group Receipt For: Primary General Other (specify) ▼	_ , '	n ic Radiologist e Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Dr. Paul Ellenbogen Mailing Address 6612 Cliffbrook Dr			Date of Receipt
	Ctata	7in Codo	06 15 2009
City Dallas	State TX	Zip Code 75254-8613	Transaction ID: 30251619 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70204 0010	208.34
Name of Employer Southwest Imaging & Inter-	Occupatio	n ic Radiologist	
ven specialis Receipt For:	_ , '	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1250.04	
Full Name (Last, First, Middle Initial) Dr. Jorge Albin			Date of Receipt
Mailing Address 645 Mulberry Ln			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 30251621
<u>Bellaire</u>	TX	77401-3803	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer Greater Houston Radiology Associates		ic Radiologist	
Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 208.35	
SUBTOTAL of Receipts This Page (optional			350.01

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and S	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	NAME OF COMMITTEE (In Full) American College of Radiology Associations and the college of Radiology Associations	e name and ad	dress of any political committee to	o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Dr. Demetrius Morros Mailing Address 7418 Ridgecrest Cour	t Rd		Date of Receipt 0 6 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 30251622
	Birmingham FEC ID number of contributing federal political committee.	C	35242-0525	Amount of Each Receipt this Period 83.34
	Name of Employer Birmingham Radiological Group P.C. Receipt For: Primary General Other (specify) ▼		tic Radiologist e Year-to-Date ▼ 500.04	
– В.	Full Name (Last, First, Middle Initial) Dr. Paul Lampert Mailing Address 2240 S. Elks Lane Unit 55			Date of Receipt 0 6 1 5 2 0 0 9
	City	State AZ	Zip Code	Transaction ID: 30251623
	Yuma FEC ID number of contributing federal political committee.	C	85364-6284	Amount of Each Receipt this Period
	Name of Employer MDIG	Occupation Diagnos	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	, · · · ·	e Year-to-Date ▼ 750.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Daniel Cohen Mailing Address 1480 Brookfield Road			Date of Receipt 0 6 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 30251624
	Yardley FEC ID number of contributing federal political committee.	PA C	19067-3930	Amount of Each Receipt this Period 40.00
	Name of Employer Radiology Affiliates of Central NJ	, ' 	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	
Γ	SUBTOTAL of Receipts This Page (optional) .	1		248.34

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 115 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	Statements may not be sold or used by any person name and address of any political committee to ciation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. H E. Longmaid, III Mailing Address 52 Harwich Rd City Chestnut Hill FEC ID number of contributing federal political committee. Name of Employer Deaconess Hospital Receipt For: Primary Other (specify)	State Zip Code MA 02467-3023 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.02	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Raja Cheruvu Mailing Address 165 Via Foresta Ln City Williamsville FEC ID number of contributing federal political committee. Name of Employer Windsong Radiology Group Receipt For: Primary General Other (specify)	State Zip Code NY 14221-1984 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 1200.00	Date of Receipt M M M / D D V 2009 Transaction ID: 30251627 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) Dr. Kevin Smith Mailing Address Regional Diagnostic 1406 6th Ave N City Saint Cloud FEC ID number of contributing federal political committee. Name of Employer Regional Diagnostic Radiology Receipt For: Primary General Other (specify)	Radiology State Zip Code MN 56303-1900 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 625.00	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		404.17

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and S	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 115 (check only one) X
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	dress of any political committee to	o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Dr. Kevin O'Brien Mailing Address St Johns Macomb Hos 11800 E 12 Mile Rd	<u> </u>		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 30251635
	Warren FEC ID number of contributing federal political committee.	C	48093-3494	Amount of Each Receipt this Period 40.00
	Name of Employer Diagnostic Radiology Cons- ultants, PC Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	, '	on tic Radiologist e Year-to-Date ▼ 240.00	
В.	Full Name (Last, First, Middle Initial) Dr. William Deeter, III Mailing Address 14 Ryedale Ct			Date of Receipt 0 6 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 30251636
	Greenville	SC	29615-6037	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer Greenville Radiology	Occupation	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.02	
_	Full Name (Last, First, Middle Initial)			Date of Descript
C.	Dr. Robert Mittl, JR Mailing Address 4733 Coburn Court			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 30251638
	Charlotte	NC	28277-2593	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Charlotte Radiology	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 336.00	
	SUBTOTAL of Receipts This Page (optional)			123.67
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26/115 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Joel Swartz			Date of Receipt
Mailing Address 1210 Page Ter			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Villanova	State PA	Zip Code 19085-2132	Transaction ID: 30251639
FEC ID number of contributing federal political committee.	C	19065-2132	Amount of Each Receipt this Period 50.00
Name of Employer Self-Employed	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Jennifer Lynch			Date of Receipt
Mailing Address 154 Forest Ave			0 6 1 6 2 0 0 9
City Cohasset	State MA	Zip Code	Transaction ID: 30256823
FEC ID number of contributing federal political committee.	C	02025-1340	Amount of Each Receipt this Period 500.00
Name of Employer South Shore Radiology Ass- ociates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)			Date of Passint
Dr. Slobodan Miseljic Mailing Address 20 Lawrence St			Date of Receipt 0 6 1 6 2 0 0 9
City	State	Zip Code	Transaction ID: 30256824
Boston FEC ID number of contributing federal political committee.	C	02116-6211	Amount of Each Receipt this Period 500.00
Name of Employer South Shore Radiology Ass- ociates		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
			1050.00

e may not be sold or used by any person diaddress of any political committee to oblitical Action Committee e Zip Code 02116-1619 coation nostic Radiologist egate Year-to-Date 500.00	Date of Receipt Date of Receipt M M / D D / 2009 Transaction ID: 30256825 Amount of Each Receipt this Period Date of Receipt Date of Receipt
e Zip Code 02116-1619 Dation nostic Radiologist egate Year-to-Date ▼ 500.00	Transaction ID: 30256825 Amount of Each Receipt this Period 500.00 Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
oation nostic Radiologist egate Year-to-Date ▼ 500.00	Transaction ID: 30256825 Amount of Each Receipt this Period 500.00 Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
oation nostic Radiologist egate Year-to-Date ▼ 500.00	Transaction ID: 30256825 Amount of Each Receipt this Period 500.00 Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
oation nostic Radiologist egate Year-to-Date ▼ 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
pation nostic Radiologist egate Year-to-Date ▼	Date of Receipt M M D D V Y Y Y Y Y Y Y Y Y
nostic Radiologist egate Year-to-Date ▼ 500.00	06 16 2009
500.00	06 16 2009
e Zip Code	06 16 2009
e Zip Code	06 16 2009
e Zip Code	Transaction ID: 30256827
	Transaction ID: 30230027
14127-2015	Amount of Each Receipt this Period
	365.00
pation nostic Radiologist	
egate Year-to-Date ▼ 365.00	
	Date of Receipt
	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
e Zip Code	Transaction ID: 30256838
48105-1815	Amount of Each Receipt this Period
	250.00
nostic Radiologist	
egate Year-to-Date ▼ 250.00	
	1115.00
11	te Zip Code 48105-1815 pation nostic Radiologist egate Year-to-Date

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 115 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add		13 14 15 16 on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass			
Full Name (Last, First, Middle Initial) Dr. Daniel Schwartzberg			Date of Receipt
Mailing Address 1250 McLynn Ave N	NE .		06 16 2009
City	State	Zip Code	Transaction ID: 30256841
Atlanta	GA	30306-2530	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Georgia Baptist Hospital	Occupation Diagnost	c Radiologist	
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼	531 05410	240.00	
Full Name (Last, First, Middle Initial) Dr. Timothy Waltner			Date of Receipt
Mailing Address 5143 Meadow Heigl	ht Dr		06 16 2009
City	State	Zip Code	Transaction ID: 30259060
Shawnee	KS	66226-8501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Northland Radiology, Inc.	Occupation Neurorad		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Mitchel Kim			Date of Receipt
Mailing Address 8228 N Pelican Ln			06 16 2009
City	State	Zip Code	Transaction ID: 30259061
River Hills	WI	53217-2056	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		365.00
Name of Employer Wisconsin Radiology Speci- alists, S.C.	Occupation Diagnost	n c Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	365.00	
			655.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 115 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso g the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Fred Klein Mailing Address 4334 Bellhaven Ln City Oshkosh FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of Fox Valley SC Receipt For:	State Zip Code WI 54904-9338 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y O 6 1 6 2 0 0 9 Transaction ID: 30259062 Amount of Each Receipt this Period 250.00
Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Francis Pauli	250.00	Date of Receipt
Mailing Address 853 Asa Gray Dr City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer Huron Valley Radiology, P.C. Receipt For: Primary General Other (specify) ▼	State Zip Code MI 48105-2566 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Transaction ID: 30259063 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Michael Alpern Mailing Address 3950 Wynnstone E City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer Huron Valley Radiology, P.C. Receipt For: Primary General Other (specify)	Or State Zip Code MI 48105-2864 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (options	al)	1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Lawrence Davis Mailing Address 5 Veritas Way City Barrington FEC ID number of contributing federal political committee. Name of Employer Rhode Island Medical Imaging Receipt For:	State Zip Code RI 02806-2751 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. John Pezzullo	500.00	Date of Receipt
Mailing Address 175 Downing Dr City Johnston FEC ID number of contributing federal political committee. Name of Employer Rhode Island Medical Imaging Receipt For: Primary General	State Zip Code RI 02919-6441 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Transaction ID: 30259078 Amount of Each Receipt this Period 250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jerrold Boxerman Mailing Address 24 Eisenhower Dr	250.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sharon FEC ID number of contributing federal political committee.	State Zip Code MA 02067-2413	Transaction ID: 30259079 Amount of Each Receipt this Period 250.00
Name of Employer Rhode Island Medical Imaging Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional	l) >	1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. John Cronan			Date of Receipt
Mailing Address 6 Atlantic Crossing			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Barrington	State RI	Zip Code 02806-2358	Transaction ID: 30259080 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	02000 2000	250.00
Name of Employer Rhode Island Medical Imag- ing Receipt For:		n ic Radiologist e Year-to-Date ▼	
Primary General Other (specify) ▼	riggiogate	250.00	
Full Name (Last, First, Middle Initial) Dr. Thaddeus Herliczek			Date of Receipt
Mailing Address 14 Winterberry Land	e		0 6 1 6 2 0 0 9
City	State	Zip Code	Transaction ID: 30259081
Westport FEC ID number of contributing federal political committee.	C	02790-2638	Amount of Each Receipt this Period 250.00
Name of Employer Rhode Island Medical Imag-	Occupation	n ic Radiologist	
Receipt For:	_ , ' _ <u> </u>	e Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Dr. Leo Flynn			Date of Receipt
Mailing Address 5625 Blue Stem Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State SD	Zip Code	Transaction ID: 30319607
Rapid City FEC ID number of contributing federal political committee.	C	57702-8990	Amount of Each Receipt this Period 600.00
Name of Employer Univ of OK Hith Sci	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 600.00	
			1100.00

Ar	ny information copied from such Reports and S		13 14 15 16 1
	Tor commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u></u>	NAME OF COMMITTEE (In Full) American College of Radiology Associ	iation Political Action Committee	
	Full Name (Last, First, Middle Initial) Dr. David White		Date of Receipt
	Mailing Address 7800 Columbine Ct.		0 6 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 30319608
	Rapid City	SD 57702-9080	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	600.00
	Name of Employer Dakota Radiology Associat- es	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	600.00	
	Full Name (Last, First, Middle Initial) Dr. Timothy Frost		Date of Receipt
	Mailing Address 7660 Elkhart Rd		06 17 2009
	City	State Zip Code	Transaction ID: 30319609
	Rapid City	SD 57702-4793	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	600.00
	Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	
	Receipt For: Primary General	Aggregate Year-to-Date ▼ 600.00	7
_	Other (specify)	000.00	
	Full Name (Last, First, Middle Initial) Dr. Ronald Baxter		Date of Receipt
	Mailing Address Radiology Associates 716 Quincy St	7.0.1	06 17 2009
	City Rapid City	State Zip Code SD 57701-3632	Transaction ID: 30319610
	FEC ID number of contributing federal political committee.	C 3/7/01-3632	Amount of Each Receipt this Period 600.00
	Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	600.00	7
s	UBTOTAL of Receipts This Page (optional)		1800.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc			
Full Name (Last, First, Middle Initial) Dr. Brian Baxter Mailing Address 9151 Clarkson Rd City Rapid City FEC ID number of contributing federal political committee.	State SD	Zip Code 57702-9193	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Radiology Associates Receipt For: Primary General Other (specify) ▼	, '	n cic Radiologist e Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Dennis Nesbit Mailing Address 2716 Country Club Dr	1		Date of Receipt 0 6 1 7 2 0 0 9
City	State	Zip Code	Transaction ID: 30319612
Rapid City	SD	57702-5215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		600.00
Name of Employer Radiology Associates	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	, · · · · ·	e Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Gregory Saffell	<u> </u>		Date of Receipt
Mailing Address 3981 Forest Park Cir			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 30319613
Rapid City	SD	57702-6927	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		600.00
Name of Employer Radiology Associates	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)			1800.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than usin	and Statements may not be sold or used by any person gethe name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology As	ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Janet Shaefer		Date of Receipt
Mailing Address PO Box 1574		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30319614
Rapid City	SD 57709-1574	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Jon Stenberg		Date of Receipt
Mailing Address 403 N Berry Pine	Road	0 6 1 7 2 0 0 9
City	State Zip Code	Transaction ID: 30319615
Rapid City	SD 57702-1856	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Rebecca Belsaas	L	Date of Receipt
Mailing Address 5980 Wildwood D	r	0 6 1 7 2 0 0 9
City	State Zip Code	Transaction ID: 30319616
Rapid City	SD 57702-8818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (option	nal)	1800.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 115 (check only one) X
or for commercial purposes, other than u	ts and Statements may not be sold or used by any perso sing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology	Association Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Robert Durst, JR		Date of Receipt
Mailing Address 5353 Berglund F	Rd	06 17 2009
City	State Zip Code	Transaction ID: 30319617
Rapid City	SD 57701-8914	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Habbe		Date of Receipt
Mailing Address 13891Clydesdal	le Rd	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30319618
Rapid City	SD 57702-7339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. William Zavitz		Date of Receipt
Mailing Address 3980 Corral Dr		0 6 1 7 2 0 0 9
City	State Zip Code	Transaction ID: 30319619
Rapid City	SD 57702-9283	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Radiology Associates, LLC	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (opt	tional)	1800.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 115 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any personate the name and address of any political committee to sociation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Ryvicker		Date of Receipt
Mailing Address 46 Alton Rd City	State Zip Code	0 6 1 7 2 0 0 9 Transaction ID: 30319630
Providence	RI 02906-4704	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Rhode Island Medical Imag- ing	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Julie Song Mailing Address 9 Lu Stubbs Ln		Date of Receipt
Walling Address 9 Ed Stubbs Eff		06 17 2009
City	State Zip Code	Transaction ID: 30319631
Sharon	MA 02067-2367	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Rhode Island Medical Imag- ing	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. David Neumann		Date of Receipt
Mailing Address 20 Pardons Wood I	Ln	06 17 2009
City	State Zip Code	Transaction ID: 30319632
East Greenwich	RI 02818-1446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Rhode Island Medical Imag- ing	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	al)	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	Statements may not be sold or used by any persone name and address of any political committee to ciation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Nathaniel Adamson Mailing Address 177 Diamond Ct City Harrisonburg FEC ID number of contributing federal political committee. Name of Employer Rockingham Radiologists, Ltd. Receipt For: Primary General	State Zip Code VA 22801-3414 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. James Baek Mailing Address 1701 Stonehenge Rd City Charleston FEC ID number of contributing federal political committee. Name of Employer KVR	State Zip Code WV 25314-1675 C Occupation Diagnostic Radiologist	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary	Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Florence Radiological Associates Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 312.50	1427.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 115 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any perso the name and address of any political committee to occiation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Samuel Hill, IV Mailing Address 1860 Houndsfield D City Florence FEC ID number of contributing	State Zip Code SC 29506-8552	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee. Name of Employer Florence Radiological Associates, P.A. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 312.50	62.50
Full Name (Last, First, Middle Initial) Dr. Carol Collings Mailing Address 9584 Estes Rd City Macon	State Zip Code GA 31220-5611	Date of Receipt M
FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of Macon, P.C. Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Dr. David Grand Mailing Address 21 Westford Rd City Providence FEC ID number of contributing federal political committee.	State Zip Code RI 02906-4943	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Rhode Island Medical Imaging Receipt For: □ Primary □ General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional	l) >	812.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any persor the name and address of any political committee to s sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Susan Koelliker Mailing Address 5 Lighthouse Ln City Barrington FEC ID number of contributing federal political committee. Name of Employer Rhode Island Medical Imaging Receipt For: Primary General Other (specify)	State Zip Code RI 02806-2829 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	Date of Receipt M M J D D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Daniel Cohen Mailing Address 38 Lake Forest Dr City Richmond Heights FEC ID number of contributing federal political committee. Name of Employer Radiologic Imaging Consultants Receipt For: Primary General Other (specify)	State Zip Code MO 63117-1303 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Richard Gold Mailing Address 200 Exchange St U City Providence FEC ID number of contributing federal political committee. Name of Employer Rhode Island Medical Imaging Receipt For: Primary General Other (specify)	State Zip Code RI 02903-2624 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (options	al)	1250.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Asso	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Linda Donegan		Date of Receipt
Mailing Address 125 Juniper Dr		0 6 1 8 2 0 0 9
City	State Zip Code	Transaction ID: 30367253
East Greenwich	RI 02818-1371	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Rhode Island Medical Imag-	Occupation	7
ing Receipt For:	Diagnostic Radiologist Aggregate Year-to-Date ▼	\dashv
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. David Panush		Date of Receipt
Mailing Address 538 E 84th St Apt 4E		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30440666
New York	NY 10028-7357	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	
Full Name (Last, First, Middle Initial) Dr. Andrew Osiason		Date of Receipt
Mailing Address 506 Julie Ct		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30440667
Wyckoff	NJ 07481-1101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	499.98	
	1	

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 115 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	Statements may not be sold or used by any pers ne name and address of any political committee to ciation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Robert Krugman Mailing Address 10 Lexington Ct City Englewood FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)	State Zip Code NJ 07631-3081 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 461.52	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Kavita Patel Mailing Address 52 Oxford Lndg City Weehawken FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)	State Zip Code NJ 07086-6650 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 269.22	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Arthur S. Albert Mailing Address 124 W 60th St Apt 45 City New York FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)	State Zip Code NY 10023-7451 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 499.98	Date of Receipt M M / D D / Y Y Y Y Y O 6 22 2 2 009 Transaction ID: 30440670 Amount of Each Receipt this Period 38.46
SUBTOTAL of Receipts This Page (optional)	<u> </u>	115.38

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associ	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr. Harry Agress, JR			Date of Receipt
	Mailing Address Hackensack University 30 Prospect Ave	06 22 7 2009		
	City Hackensack	State NJ	Zip Code 07601-1914	Transaction ID: 30440673 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		38.46
	Name of Employer Hackensack Radiology Group	,	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 499.98	
3.	Full Name (Last, First, Middle Initial) Dr. Adam Bogomol Mailing Address 50 W 72nd St Apt 150	9		Date of Receipt
	·	06 22 2009		
	City New York	State NY	Zip Code 10023-4132	Transaction ID: 30440674 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.46
	Name of Employer Hackensack Radiology Group	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 499.98	
_).	Full Name (Last, First, Middle Initial) Dr. Hiten Magan Malde			Date of Receipt
	Mailing Address 7 Kinkaid Ave			06 22 2009
	City Closter	State NJ	Zip Code 07624-2908	Transaction ID: 30440675
	FEC ID number of contributing federal political committee.	C	07024-2908	Amount of Each Receipt this Period 38.46
	Name of Employer Hackensack Radiology Group	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	,	e Year-to-Date ▼ 499.98	
	SUBTOTAL of Receipts This Page (optional)	ı		115.38
Ī	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Asso	d Statements may not be sold or used by any perso the name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. George Joseph Ferrone Mailing Address 440 E 62nd St Apt 1 City New York FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)	State Zip Code NY 10065-8345 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 499.98	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Sean D. Pierce Mailing Address 509 48th Ave Apt 2A City Long Island City FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)	State Zip Code NY 11101-5604 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 499.98	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Mitchell Miller Mailing Address 2 Constitution Ct Ap City Hoboken FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y O 6 22 2 2 0 0 9 Transaction ID: 30440681 Amount of Each Receipt this Period 38.46
SUBTOTAL of Receipts This Page (optional)		115.38

	SCHEDULE A (FEC Form 3X)	1	Use separate schedule(s)	FOR LINE NUMBER: PAGE 44 / 115 (check only one)
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso			
Α.	Full Name (Last, First, Middle Initial) Dr. Rita S. Patel			Date of Receipt
	Mailing Address 3 Ware Rd			0 6 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Upper Saddle River	State NJ	Zip Code 07458-1919	Transaction ID: 30440682 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		38.46
	Name of Employer Hackensack Radiology Group	Occupatio	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 499.98	
В.	Full Name (Last, First, Middle Initial) Dr. John DeMeritt			Date of Receipt
	Mailing Address 18 Baldwin Rd	06 22 2009		
	City	State	Zip Code	Transaction ID: 30440683
	Saddle River FEC ID number of contributing	NJ	07458-3203	Amount of Each Receipt this Period
	federal political committee.	C		38.46
	Name of Employer Hackensack Radiology Group	Occupation Diagnost	n tic Radiologist	
	Receipt For:	_, · _ · _	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	499.98	
C.	Full Name (Last, First, Middle Initial) Dr. Patrick Toth			Date of Receipt
	Mailing Address 201 E 80th St Apt 8F			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 30440684
	New York FEC ID number of contributing	NY	10021-0515	Amount of Each Receipt this Period
	federal political committee.	С		38.46
	Name of Employer Hackensack Radiology Group	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		499.98	
	SUBTOTAL of Receipts This Page (optional)			115.38
	TOTAL This Period (last page this line number	er only))	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to association Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Joel Rakow Mailing Address 505 Ivy Lane City Wyckoff FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For:	State Zip Code NJ 07481-1072 C Occupation Diagnostic Radiologist	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify)	Aggregate Year-to-Date ▼ 499.98	
Dr. Gene Han Mailing Address 24 Briarcliff Rd City Tenafly FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼	State Zip Code NJ 07670-2902 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 230.76	Date of Receipt M M / D D / Y Y Y Y Y 2 0 0 9 Transaction ID: 30440687 Amount of Each Receipt this Period 19.23
Full Name (Last, First, Middle Initial) Dr. William Kim Mailing Address 405 Golf Course I City Leonia FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)	Or State Zip Code NJ 07605-1415 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 230.76	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	nal)	76.92

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 115 (check only one) X 11a
(Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ì	NAME OF COMMITTEE (In Full) American College of Radiology Assor	ciation Politic	cal Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Clement Yang Mailing Address 555 W 59th St Apt 19			Date of Receipt
		06 22 2009		
	City New York	State NY	Zip Code 10019-1006	Transaction ID: 30440689 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	19.23
	Name of Employer Hackensack Radiology Group	Occupation	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 230.76	
_ В.	Full Name (Last, First, Middle Initial) Dr. Margaret Emy	<u> </u>		Date of Receipt
	Mailing Address 245 Oxford Dr	06 22 2009		
			Zip Code	Transaction ID: 30440690
	Tenafly FEC ID number of contributing federal political committee.	NJ C	07670-3117	Amount of Each Receipt this Period
	Name of Employer Hackensack Radiology Group	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 230.76	
С. С.	Full Name (Last, First, Middle Initial) Dr. Sunitha Sunkavalli			Date of Receipt
	Mailing Address 943 High Mountain R	d		M M / D D / Y Y Y Y Y Y Y Y Y Y Z D O 9
	City	State	Zip Code	Transaction ID: 30440691
	Franklin Lakes FEC ID number of contributing federal political committee.	C	07417-1619	Amount of Each Receipt this Period 19.23
	Name of Employer Hackensack Radiology Group	Occupation	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 230.76	
	SUBTOTAL of Receipts This Page (optional)	1		57.69
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 4//115 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As			
Full Name (Last, First, Middle Initial) Dr. Gregory Nicola			Date of Receipt
Mailing Address 101 W End Ave Ap	06 22 2009		
City New York	State NY	Zip Code	Transaction ID: 30440696
FEC ID number of contributing federal political committee.	C	10023-6337	Amount of Each Receipt this Period 19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 230.76	
Full Name (Last, First, Middle Initial) Dr. Gail Starr			Date of Receipt
Mailing Address Hackensack Unive			
City Hackensack	State Zip Code USack NJ 07601-1962		
FEC ID number of contributing federal political committee.	C	07001-1902	Amount of Each Receipt this Period 19.23
Name of Employer Hackensack Radiology Group	Occupation	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 230.76	
Full Name (Last, First, Middle Initial) Dr. Joel Budin			Date of Receipt
Mailing Address 140 Chestnut St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 30440698
Englewood FEC ID number of contributing federal political committee.	C	07631-3033	Amount of Each Receipt this Period 16.03
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	7
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 275.68	
SUBTOTAL of Receipts This Page (options	I		54.49

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 115 (check only one) X
or fo	information copied from such Reports and Si r commercial purposes, other than using the IAME OF COMMITTEE (In Full) American College of Radiology Associ	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ . <u>D</u>	ull Name (Last, First, Middle Initial) or. John Williams failing Address 1108 Hazeltine Ln NW			Date of Receipt 0 6 2 4 2 0 0 9
	ity Kennesaw	State GA	Zip Code 30152-4742	Transaction ID: 30458086
F	EC ID number of contributing ederal political committee.	C	30152-4742	Amount of Each Receipt this Period 500.00
_	lame of Employer Quantum Radiology Receipt For: Primary General Other (specify)		n cic Radiologist e Year-to-Date ▼ 500.00	
. <u>D</u>	ull Name (Last, First, Middle Initial) br. Brian M. Gordon failing Address 470 Winfield Glen Ct N	IE		Date of Receipt 0 6 2 4 2 0 0 9
C	ity	State	Zip Code	Transaction ID: 30458087
F	Atlanta EC ID number of contributing ederal political committee.	GA C	30342-1430	Amount of Each Receipt this Period 365.00
N	ame of Employer Quantum Radiology	Occupatio Diagnost	n ic Radiologist	
R	leceipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 365.00	
	ull Name (Last, First, Middle Initial) Dr. Sarah Bochar			Date of Receipt
_	Mailing Address 85 N Devereux Ct			0 6 2 4 2 0 0 9
	ity	State	Zip Code	Transaction ID: 30458088
F	Atlanta EC ID number of contributing ederal political committee.	GA C	30327-4225	Amount of Each Receipt this Period 365.00
N	lame of Employer Quantum Radiology	Occupatio	n ic Radiologist	
R	leceipt For: Primary General Other (specify) ▼	_ <u> </u>	e Year-to-Date ▼ 365.00	
SUE	BTOTAL of Receipts This Page (optional)			1230.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 115 (check only one) X 11a
C	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements man	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Asso	ciation Politic	al Action Committee	
Α.	Dr. Richard Noto Mailing Address 1 Ferncliffe Rd			Date of Receipt
				06 24 2009
	City Barrington	State RI	Zip Code	Transaction ID: 30458091
	FEC ID number of contributing federal political committee.	C	02806-4017	Amount of Each Receipt this Period 250.00
	Name of Employer Rhode Island Medical Imag- ing	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) Dr. Holly Gil			Date of Receipt
	Mailing Address 17 Adams Point Rd			06 24 2009
	City	State	Zip Code	Transaction ID: 30458092
	Barrington	RI	02806-5005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Rhode Island Medical Imag-	Occupatio	ⁿ ic Radiologist	
	ing Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
С. С.	Full Name (Last, First, Middle Initial) Dr. Mark Silverstein			Date of Receipt
	Mailing Address 418 Spring House Cv	/ NE		06 24 2009
	City	State	Zip Code	Transaction ID: 30458093
	Atlanta	GA	30307-1187	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Quantum Radiology	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 50 / 115 (check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American College of Radiology Assoc	iation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Alan Zuckerman			Date of Receipt
Mailing Address 798 Birds Mill SE			0 6 2 4 2 0 0 9
City	State	Zip Code	Transaction ID: 30458094
Marietta	GA	30067-5135	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Quantum Radiology	Occupation		
		ic Radiologist	\dashv
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	7
Other (specify)		1000.00	1
Full Name (Last, First, Middle Initial) Dr. Lonnie Simmons	•		Date of Receipt
Mailing Address Gundersen/Lutheran M 1900 South Ave C02-0		er	0 6 2 4 2 0 0 9
City	State	Zip Code	Transaction ID: 30458095
La Crosse	WI	54601-5467	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		83.34
Name of Employer Gundersen Lutheran Clinic	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.04	
Full Name (Last, First, Middle Initial) Dr. William Cruz			Date of Receipt
Mailing Address 1362 Magdalena Ave.,	, V-102		06 25 2009
City	State	Zip Code	Transaction ID: 30459905
San Juan	PR	00907-2029	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer MedScan, PSC	Occupation	n ic Radiologist	
Receipt For:	1 '	e Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00]
SUBTOTAL of Receipts This Page (optional)	1		2083.34

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 115 (check only one) X 11a
,	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ì	American College of Radiology Assoc	ciation Politic	cal Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Charles Hecht-Leavitt			Date of Receipt
	Mailing Address MRI & CT Diagnostics 4668 Pembroke Blvd			06 25 2009
	City	State	Zip Code	Transaction ID: 30459908
	Virginia Beach	VA	23455-6423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer MRI & CT Diagnostics	Occupation Diagnos	on tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼	0 0	1000.00	
В.	Full Name (Last, First, Middle Initial) Dr. Janet Storella			Date of Receipt
	Mailing Address 6515 Fallwind Ln			06 / 29 / 2009
	City	State	Zip Code	Transaction ID: 30479143
	Bethesda	MD	20817-4941	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Drs Grover, Christie & Me- rritt	, ' <u> </u>	tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		480.00	
_ C.	Full Name (Last, First, Middle Initial) Dr. William Campbell, JR			Date of Receipt
	Mailing Address 527 N Palo Alto Ave			06 29 2009
	City	State	Zip Code	Transaction ID: 30479144
	Panama City	FL	32401-3639	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Bay Radiology Associates	- · · · · ·	tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 600.00	7
_	Other (specify) ▼	0 0	000.00	
	SUBTOTAL of Receipts This Page (optional) .			1140.00
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 115 (check only one) X
	I Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Carl Bailey, JR		Date of Receipt
Mailing Address 710 Bunkers Cove R City	td State Zip Code	0 6 29 2009 Transaction ID: 30479145
Panama City	FL 32401-3920	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Bay Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Lloyd Logue		Date of Receipt
Mailing Address 3943 Indian Springs		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30479146
Panama City	FL 32404-5794	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Bay Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Gregory Presser		Date of Receipt
Mailing Address PO Box 1770		06 29 2009
City Panama City	State Zip Code FL 32402-1770	Transaction ID: 30479147 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Bay Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)		300.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the (check drilly drie)
A	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or used by e name and address of any political cor	any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Political Action Committee)
	Full Name (Last, First, Middle Initial) Dr. Scott Ramey		Date of Receipt
	Mailing Address Bay Radiology Assoc PO Box 1770		06 29 2009
	City	State Zip Code	Transaction ID: 30479148
	Panama City FEC ID number of contributing federal political committee.	FL 32402-1770	Amount of Each Receipt this Period 100.00
	Name of Employer Bay Radiology Associates, P.A. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 60	0.00
	Full Name (Last, First, Middle Initial) Dr. James Strohmenger Mailing Address 2818 Canal Dr		Date of Receipt 0 6 2 9 2 0 0 9
	City	State Zip Code	Transaction ID: 30479149
	Panama City	FL 32405-1610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Bay Radiology Associates	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
_	Full Name (Last, First, Middle Initial) Dr. Emily Billingsley		Date of Receipt
	Mailing Address 449 Sudduth Ave		06 29 2009
	City	State Zip Code	Transaction ID: 30479150
	Panama City	FL 32401-3958	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	100.00
	Name of Employer Bay Radiology Associates	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
Γ	SUBTOTAL of Receipts This Page (optional)	1	300.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Jason Browning Mailing Address 1016 Sunset Ln City Lynn Haven FEC ID number of contributing federal political committee. Name of Employer Bay Radiology Associates Receipt For: Primary General Other (specify)	State Zip Code FL 32444-3455 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 600.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Wendy Kriegel Mailing Address 528 S Bonita Ave City Panama City FEC ID number of contributing federal political committee. Name of Employer Bay Radiology Associates Receipt For: Primary General Other (specify)	State Zip Code FL 32401-3979 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Isaac Kirk, III Mailing Address 2211 Sheridan St City Houston FEC ID number of contributing federal political committee. Name of Employer St. Joseph Radiology Associates Receipt For: Primary General Other (specify)	State Zip Code TX 77030-2015 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	al)	450.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER: PAGE 55 / 115 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associated			
	Tation Folitical Act		
Full Name (Last, First, Middle Initial) Dr. Bibb Allen, JR			Date of Receipt
Mailing Address 2000A Southbridge Pl	kwy Ste 300		06 30 7 2009
City		ip Code	Transaction ID: 30483545
Birmingham	AL 3	35209-1327	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Montclair Baptist Medical Center	Occupation Diagnostic Ra	diologist	
Receipt For:	Aggregate Year-		
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Dr. Paul Sangster			Date of Receipt
Mailing Address 3281 S Little Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Z	ip Code	Transaction ID: 30483546
Flagstaff	AZ 8	36001-9119	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		125.00
Name of Employer Retired	Occupation Diagnostic Ra	diologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Robert Rhodes, III	1		Date of Receipt
Mailing Address 1041 Maple Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Z	ip Code	Transaction ID: 30483547
Athens	GA 3	30606-5746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Athens Radiology Associat- es	Occupation Diagnostic Ra	diologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-		
SUBTOTAL of Receipts This Page (optional)			500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. C Smith Mailing Address 124 W Lake Ct City Athens FEC ID number of contributing federal political committee. Name of Employer Athens Radiology Associates Receipt For: Primary General Other (specify)	State Zip Code GA 30606-4655 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y O 6 3 0 2 0 0 9 Transaction ID: 30483548 Amount of Each Receipt this Period 125.00
Full Name (Last, First, Middle Initial) Dr. Curtis Poor Mailing Address 2415 Eagle Cir City Bettendorf FEC ID number of contributing federal political committee. Name of Employer Radiology Group PC SC Receipt For: Primary General Other (specify)	State Zip Code IA 52722-6202 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y O 6 3 0 2 0 0 9 Transaction ID: 30483549 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Sean Theisen Mailing Address 1346 Whispering N City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer Huron Valley Radiology Receipt For: Primary General Other (specify)	Maples Ct State Zip Code MI 48108-2492 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M M M / D 3 0 / Y Y Y Y Y Transaction ID: 30483607 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (option	al)	875.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sche for each category of Detailed Summary	of the (cricer only only)
A	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may not be sold or used be name and address of any political c	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associated in the college of Radiolog	ciation Political Action Committe	ee
	Full Name (Last, First, Middle Initial) Dr. Mark Yuhasz		Date of Receipt
	Mailing Address Tacoma Radiological PO Box 1535		06 30 7 2009
	City	State Zip Code	Transaction ID: 30483608
	Tacoma FEC ID number of contributing federal political committee.	WA 98401-1535	Amount of Each Receipt this Period 250.00
	Name of Employer Tacoma Radiology Associates Receipt For: Primary General Other (specify) ▼		00.00
	Full Name (Last, First, Middle Initial) Dr. Michael Shick Mailing Address 2921 Crossfield Dr	1	Date of Receipt
	011	01-1- 7'- 0-1-	06 30 2009
	City Greensboro	State Zip Code NC 27408-6743	Transaction ID: 30483609 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer Wake Forest Univ Baptist Med C Receipt For: Primary General	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
	Other (specify) ▼	2	50.00
	Full Name (Last, First, Middle Initial) Dr. Mark Alson		Date of Receipt
	Mailing Address 6641 N Forkner Ave		06 30 7 2009
	City	State Zip Code	Transaction ID: 30483624
	Fresno	CA 93711-1326	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer Sierra Imaging Associates	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	50.00
Γ,	SUBTOTAL of Receipts This Page (optional)	1	425.00

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 115 (check only one) X
or for comme	ion copied from such Reports and Sercial purposes, other than using the FCOMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	an College of Radiology Assoc	iation Politic	al Action Committee	
	e (Last, First, Middle Initial) rd Zawodniak ddress 1439 Garrett Dr			Date of Receipt
	duress 1439 Garrell Dr			06 30 2009
City Wall To	wnshin	State NJ	Zip Code 07719-9648	Transaction ID: 30483625 Amount of Each Receipt this Period
FEC ID n	number of contributing olitical committee.	C	07713 3040	40.00
Name of Jersey S sociates	Employer hore Radiology As-	Occupatio Diagnost	n ic Radiologist	
	For: mary General ner (specify) ♥	Aggregate	e Year-to-Date ▼ 240.00	
Dr. Micha	e (Last, First, Middle Initial) el Brannon			Date of Receipt
Mailing A	ddress 7 Foxglove Ct			06 30 2009
City		State	Zip Code	Transaction ID: 30483626
Greenvi		SC	29615-5505	Amount of Each Receipt this Period
federal po	number of contributing plitical committee.	C		42.00
Name of Greenville	Employer e Radiology	Occupatio Diagnost	n ic Radiologist	
Receipt F		Aggregate	e Year-to-Date ▼	
	mary General ner (specify) ▼	0 0	252.00	
Full Name	e (Last, First, Middle Initial) / Hu			Date of Receipt
Mailing A	ddress 302 Topwater Ln			06 30 7 2009
City		State	Zip Code	Transaction ID: 30483627
Greensl		NC	27455-3423	Amount of Each Receipt this Period
	number of contributing plitical committee.	C		60.00
Name of Greensbo	Employer oro Radiology	Occupation Diagnost	ⁿ ic Radiologist	
	For: mary General ner (specify) ▼	Aggregate	e Year-to-Date ▼ 360.00	
SUBTOTAL	L of Receipts This Page (optional)	1		142.00
	is Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Assets	d Statements may not be sold or used by any personante name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Jeffrey Potter Mailing Address 1803 Bloomsbury R City Greenville FEC ID number of contributing federal political committee. Name of Employer Eastern Radiologists Receipt For:	State Zip Code NC 27858-9617 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Edward Sullivan, III	240.00	Date of Receipt
Mailing Address Radiology Assoc of 2090 Columbiana R City Birmingham FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of Birmingham Receipt For: Primary General Other (specify) ▼		Transaction ID: 30483629 Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Dr. Carl D'Orsi Mailing Address Emory University Ho 1701 Uppergate Dr City Atlanta FEC ID number of contributing federal political committee. Name of Employer Emory University Hospital Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	105.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 115 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant statements and address of any political committee to	
American College of Radiology Asse	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Bruce Schroeder		Date of Receipt
Mailing Address 738 Lexington Dr		06 30 7 2009
City	State Zip Code	Transaction ID: 30483635
Greenville	NC 27834-0507	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Eastern Radiologists	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00]
Full Name (Last, First, Middle Initial) Dr. Richard Redvanly		Date of Receipt
Mailing Address 4315 Gosford PI		06 30 7 2009
City	State Zip Code	Transaction ID: 30483636
<u>Charlotte</u>	NC 28277-4546	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	366.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Jaindl		Date of Receipt
Mailing Address 939 Quarter Round	Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30483637
Pacolet	SC 29372-3516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Greenville Radiology, P.A.	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
)	180.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any perso the name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Deborah Agisim Mailing Address 5600 Laurium Rd City Charlotte FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology Receipt For: Primary General Other (specify)	State Zip Code NC 28226-5610 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 240.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Dennis Johnson Mailing Address	State Zip Code NC 27834-2801 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 240.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. James Rawson Mailing Address Medical College of 0 1120 15th St BA141 City Augusta FEC ID number of contributing federal political committee. Name of Employer Medical College of Georgia Receipt For: Primary General Other (specify)	Georgia 4 State Zip Code GA 30912-0006 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.04	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	163.34

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any perso the name and address of any political committee to occiation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Mary Pomeroy Mailing Address 2625 Rolling Hills C City Monroe	Or State Zip Code NC 28110-8408	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 378.00	42.00
Full Name (Last, First, Middle Initial) Dr. Joel Wissing Mailing Address Charlotte Radiology PO Box 36937 City Charlotte FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology Receipt For: Primary General Other (specify)	State Zip Code NC 28236-6937 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 366.00	Date of Receipt M M M / D D / Y Y Y Y Y O 6 3 0 / 2 0 0 9 Transaction ID: 30483643 Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Dr. Mark Wittry Mailing Address 10525 Concord Sch City Saint Louis FEC ID number of contributing federal political committee. Name of Employer West County Radiological Group, Inc. Receipt For: Primary General Other (specify)	State Zip Code MO 63128-1232 C Occupation Cardiac Radiologist Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	l) >	167.00

Any information copied from such Reports and Stat or for commercial purposes, other than using the national purposes. All Name (Last, First, Middle Initial) Dr. Alfred Mansour, JR Mailing Address Central LA Imaging Inc 3704 North Blvd Ste A City Alexandria FEC ID number of contributing federal political committee. Name of Employer Central LA Imaging Inc. Receipt For: Primary General Other (specify)	State LA Occupation Diagnosti	zip Code 71301-3606	Date of Receipt Date of Receipt
Dr. Alfred Mansour, JR Mailing Address Central LA Imaging Inc 3704 North Blvd Ste A City Alexandria FEC ID number of contributing federal political committee. Name of Employer Central LA Imaging Inc. Receipt For: Primary General	C Occupation Diagnostic	71301-3606 c Radiologist Year-to-Date ▼	Transaction ID: 30483649 Amount of Each Receipt this Period
City Alexandria FEC ID number of contributing federal political committee. Name of Employer Central LA Imaging Inc. Receipt For: Primary General	C Occupation Diagnostic	71301-3606 c Radiologist Year-to-Date ▼	Transaction ID: 30483649 Amount of Each Receipt this Period
Alexandria FEC ID number of contributing federal political committee. Name of Employer Central LA Imaging Inc. Receipt For: Primary General	C Occupation Diagnostic	71301-3606 c Radiologist Year-to-Date ▼	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Central LA Imaging Inc. Receipt For: Primary General	C Occupation Diagnosti	c Radiologist Year-to-Date ▼	
Receipt For: Primary General	Diagnosti	c Radiologist Year-to-Date ▼	
Primary General	Aggregate		
			+
Full Name (Last, First, Middle Initial) Dr. William Way, JR Mailing Address 7713 Oakmont PI			Date of Receipt
			06 30 2009
City	State	Zip Code	Transaction ID: 30483652
Raleigh FEC ID number of contributing federal political committee.	NC C	27615-5492	Amount of Each Receipt this Period 40.00
Name of Employer Wake Radiology		c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Dr. Roger Vithalani			Date of Receipt
Mailing Address 516 Chesapeake Place			06 30 7 2009
City	State	Zip Code	Transaction ID: 30483653
Greenville	NC	27858-0678	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		40.00
Name of Employer Eastern Radiology		c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional)			163.34

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Marcela Bohm-Velez		Date of Receipt
Mailing Address Weinstein Imaging 7 5850 Centre Ave		06 30 7 2009
City	State Zip Code	Transaction ID: 30483657
Pittsburgh FEC ID number of contributing federal political committee.	PA 15206-3780	Amount of Each Receipt this Period 166.67
Name of Employer Weinstein Imaging Associa- tes Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.02	
Full Name (Last, First, Middle Initial) Jr., M.D. Charles Schranck Mailing Address 75 Fairmount Dr., N	lorth	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30483658
Alton	IL 62002-3207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Midwest Radiological Asso- ciates, P.C.	Occupation Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	
Full Name (Last, First, Middle Initial) Dr. Eric Sax		Date of Receipt
Mailing Address 9 Old Sudbury Rd		06 30 7 2009
City	State Zip Code	Transaction ID: 30483660
Lincoln	MA 01773-4807	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.34
Name of Employer The Imaging Institute	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	
SUBTOTAL of Receipts This Page (optional)	292.01
TOTAL This Period (last page this line numb	·	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any point the name and address of any political committee association Political Action Committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Kay Lozano	SSOCIATION FUNITION ACTION COMMITTEE	Date of Receipt
Mailing Address 8100 E Union Ave	Apt 2104	0 6 3 0 2 0 0 9
City	State Zip Code	Transaction ID: 30483663
Denver FEC ID number of contributing federal political committee.	CO 80237-2979	Amount of Each Receipt this Period 30.42
Name of Employer Radiology Imaging Association Receipt For: Primary General	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 682.52	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. William Ketcham, II Mailing Address 8824 Wildflower I		Date of Receipt
		06 30 2009
City <u>Cheyenne</u>	State Zip Code WY 82009-1215	Transaction ID: 30483665 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Baylor College of Medicine	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Dr. Karl Chiang		Date of Receipt
Mailing Address Eastern Radiologi 9 Doctors Park		06 30 2009
City	State Zip Code NC 27834-2801	Transaction ID: 30483666
Greenville FEC ID number of contributing federal political committee.	NC 27834-2801	Amount of Each Receipt this Period 40.00
Name of Employer Eastern Radiologists Inc	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optio	nal)	110.42

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc		
/ American conege of Hadiology Assoc	ation i offical Action Committee	
Full Name (Last, First, Middle Initial) Dr. Arthur Sandy Mailing Address 2821 Argyle Rd		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30483667
Birmingham	AL 35213-3403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Advanced Imaging Assoc of AL	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Kerry Chandler		Date of Receipt
Mailing Address 4100 Mullcroft PI		06 30 2009
City	State Zip Code	Transaction ID: 30483669
Fuquay Varina	NC 27526-8658	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Wake Radiology Consultants	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Kevin Chang		Date of Receipt
Mailing Address 73 Norwood St		06 30 / Y Y Y Y Y
City	State Zip Code	Transaction ID: 30484740
Sharon	MA 02067-1262	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Brown University Alpert Medical School	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		400.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than u	is and Statements may not be sold or used by any personsing the name and address of any political committee to Association Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Ana Lourenco Mailing Address 7 Weston Ave City Foxboro FEC ID number of contributing federal political committee. Name of Employer Rhode Island Medical Imaging	State Zip Code MA 02035-1863 C Occupation Resident	Date of Receipt M M M / D D / Y Y Y Y Y O 6 3 0 2 0 0 9 Transaction ID: 30484741 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. William Mayo-Smith Mailing Address Rhode Island Homeon Service FEC ID number of contributing federal political committee. Name of Employer Rhode Island Medical Imaging Receipt For: Primary General Other (specify)	State Zip Code RI 02903-4970 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 30484742 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Jeffrey Goree Mailing Address 2320 Cromwell City Davenport FEC ID number of contributing federal political committee. Name of Employer Radiology Group, P.C. Receipt For: Primary Other (specify)	Cir State Zip Code IA 52807-2833 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 1200.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 30489996 Amount of Each Receipt this Period 600.00
SUBTOTAL of Receipts This Page (opt	ional)	1100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 115 (check only one) X 11a
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Politic	cal Action Committee	
∠ A .	Full Name (Last, First, Middle Initial) Dr. James Jelinek			Date of Receipt
	Mailing Address Washington Hospital (06 30 7 2009
	City	State	Zip Code	Transaction ID: 30489997
	Washington FEC ID number of contributing	C	20010-2975	Amount of Each Receipt this Period 45.00
	federal political committee. Name of Employer Center Radiology	Occupation	on	
		, '	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 315.00	
– В.	Full Name (Last, First, Middle Initial) Dr. Michael Bruce Gotway	1		Date of Receipt
	Mailing Address 7101 E Berneil Ln			06 30 2009
	City	State	Zip Code	Transaction ID: 30489999
	Paradise Valley	AZ	85253-1973	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		225.00
	Name of Employer Scottsdale Medical Imaging	,	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
_ С.	Full Name (Last, First, Middle Initial) Dr. William Jones			Date of Receipt
	Mailing Address 9477 E Shangri LA Ro	I		06 30 YYYYY 2009
	City	State	Zip Code	Transaction ID: 30490000
	Scottsdale	AZ	85260-6143	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Scottsdale Medical Imaging	,	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			420.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using t	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Daniel Maki Mailing Address 19621 N 96th Pl		Date of Receipt
City	State Zip Code	0 6 3 0 2 0 0 9 Transaction ID: 30490001
Scottsdale	AZ 85255-6668	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer Southwest Diagnostic Imag- ing	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Dr. Mark Keiper		Date of Receipt
Mailing Address Scottsdale Medical II 3501 N Scottsdale R		06 30 7 2009
City	State Zip Code	Transaction ID: 30490002
Scottsdale	AZ 85251-5649	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	150.00
Name of Employer Southwest Diagnostic Imag- ing	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Terry Reeves		Date of Receipt
Mailing Address 10537 E Sunnyside	Dr	06 30 7 2009
City	State Zip Code	Transaction ID: 30490004
Scottsdale	AZ 85259-2917	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer Scottsdale Medical Imaging	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	
SUBTOTAL of Receipts This Page (optional)		390.00
TOTAL This Period (last page this line numb	·	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 115 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso githe name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)	Sociation Folitical Action Committee	
Dr. Mark Kuo Mailing Address 13026 E Turquoise	Δvo	Date of Receipt
<u> </u>		06 30 2009
City	State Zip Code	Transaction ID: 30490005
Scottsdale	AZ 85259-5341	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	150.00
Name of Employer Scottsdale Medical Imaging	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Dr. William Horsley		Date of Receipt
Mailing Address Scottsdale Medical 3501 N Scottsdale		06 30 7 9 9 9
City	State Zip Code	Transaction ID: 30490006
Scottsdale	AZ 85251-5649	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Scottsdale Medical Imaging	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Chad Palmer		Date of Receipt
Mailing Address 10678 E Palm Rido	ge Dr	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30490007
Scottsdale	AZ 85255-1717	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Scottsdale Medical Imaging	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional		600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 115 (check only one) X 11a
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	name and address of any political committe	erson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Rodney Owen		Date of Receipt
Mailing Address 9122 N 60th St		0 6 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30490009
Paradise Valley	AZ 85253-1735	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	190.00
Name of Employer Scottsdale Medical Imaging	Occupation Diagnostic Radiologist	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	*
Full Name (Last, First, Middle Initial) Dr. Vipin Bansal		Date of Receipt
Mailing Address Radiological Assoc of 1500 Expo Pkwy	Sacramento	06 30 7 2009
City	State Zip Code	Transaction ID: 30490010
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Garyun Blackmon		Date of Receipt
Mailing Address 6502 Kingbird Ct		06 30 7 2009
City	State Zip Code	Transaction ID: 30490036
Rocklin	CA 95765-5813	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	•
SUBTOTAL of Receipts This Page (optional)		590.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 115 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. George Bolton		Date of Receipt
Mailing Address 133 Yankton St City	State Zip Code	06 30 2009
Folsom	CA 95630-8140	Transaction ID: 30490037 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Jonathan Breslau		Date of Receipt
Mailing Address Rad Assoc of Sacrar 1500 Expo Pkwy	nento	06 30 7 2009
City	State Zip Code	Transaction ID: 30490038
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	440.02
Name of Employer Radiological Associates of Sacramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1140.02	
Full Name (Last, First, Middle Initial) Dr. Nicole Carbo		Date of Receipt
Mailing Address Rad Assoc of Sacrar 1500 Expo Pkwy	06 30 7 2009	
City	State Zip Code CA 95815-4227	Transaction ID: 30490039
Sacramento FEC ID number of contributing federal political committee.	CA 95815-4227	Amount of Each Receipt this Period 100.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
		740.02

В.

C.

			<u> </u>		
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 73 / 115		
ITEMIZED RECEIPTS		for each category of the	(check only one)		
II LIVIIZED RECEIP 13	Detailed S		X 11a 11b 11c 12		
			13 14 15 16 17		
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
American College of Radiology Associ	ation Politic	al Action Committee			
Full Name (Last, First, Middle Initial) Dr. Christopher Chong			Date of Receipt		
Mailing Address 27075 E El Macero			06 30 2009		
City	State	Zip Code	Transaction ID: 30490040		
El Macero	CA	95618-1006	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		200.00		
Name of Employer Radiological Assoc. of Sa-	Occupatio	n ic Radiologist	1		
<u>cramento</u> Receipt For:	, ' 	e Year-to-Date			
Primary General	Aggregate	e real-lo-dale 🔻	1		
Other (specify) ▼		600.00			
Full Name (Last, First, Middle Initial) Dr. Huu-Ninh Dao			Date of Receipt		
Mailing Address 2627 Rockwell Dr			06 30 YYYYY 2009		
City	State	Zip Code	Transaction ID: 30490051		
<u>Davis</u>	CA	95618-7664	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		200.00		
Name of Employer Radiological Associates of Sacramento	Occupatio Diagnost	n ic Radiologist			
Receipt For:	Aggregate	e Year-to-Date ▼			
Primary General Other (specify) ▼	, and the second second	600.00			
Full Name (Last, First, Middle Initial) Dr. John De la Vega	<u>I</u>		Date of Receipt		
Mailing Address Rad Assoc of Sacrame 1500 Expo Pkwy	ento		06 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 30490052		
Sacramento	CA	95815-4227	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		420.01		
Name of Employer Radiological Assoc. of Sa- cramento	Occupatio Diagnost	n ic Radiologist			
Receipt For:	,	e Year-to-Date ▼			
Primary General	55 -5		1		
Other (specify) ▼		1220.01			
SUBTOTAL of Receipts This Page (optional)			820.01		

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 115 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Roland DeMarco Mailing Address 5174 Prior Rdg			Date of Receipt
City Granite Bay FEC ID number of contributing	State CA	Zip Code 95746-7186	Transaction ID: 30490053 Amount of Each Receipt this Period
Name of Employer Radiological Assoc. of Sacramento Receipt For: Primary Other (specify)	Occupatio Diagnost	n ic Radiologist • Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Dr. Scott Foster Mailing Address Radiological Assoc of 1500 Expo Pkwy	f Sacramento		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code Sacramento CA 95815-4227			Transaction ID: 30490055 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			200.00
Name of Employer Radiological Assoc. of Sa- cramento Receipt For: Primary General Other (specify) ▼		n ic Radiologist • Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Hani Greiss	I		Date of Receipt
Mailing Address Radiological Assoc of 1500 Expo Pkwy	f Sacramento		06 30 7 2009
City Sacramento	State CA	Zip Code 95815-4227	Transaction ID: 30490061
FEC ID number of contributing federal political committee.	C	93013-4221	Amount of Each Receipt this Period 200.00
Name of Employer Radiological Assoc. of Sa- cramento Receipt For: Primary General		n ic Radiologist e Year-to-Date ▼	
Other (specify) ▼	0 0	600.00	
SUBTOTAL of Receipts This Page (optional)			500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Political Action Committee		
Full Name (Last, First, Middle Initial) A. Dr. Patrick Harty		Date of Receipt	
Mailing Address 5249 Wyndham Oa	k Ln	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 30490062	
Carmichael	CA 95608-3472	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	200.00	
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	7	
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	600.00]	
Full Name (Last, First, Middle Initial) Dr. Glenn Hofer		Date of Receipt	
Mailing Address Rad Assoc of Sacra 1500 Expo Pkwy	0 1 1010 1 1000 0 1 1010 1111		
City	•		
Sacramento	CA 95815-4227	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	200.00	
Name of Employer Rad Assoc of Sacramento	Occupation Diagnostic Radiologist		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	600.00]	
Full Name (Last, First, Middle Initial) Dr. Christopher Hoffman		Date of Receipt	
Mailing Address 1117 Teneighth Wa	у	06 30 7 2009	
City	State Zip Code	Transaction ID: 30490064	
Sacramento	CA 95818-4024	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	168.00	
Name of Employer Self-Employed	Occupation Diagnostic Radiologist		
Receipt For: Primary General Other (appails)	Aggregate Year-to-Date ▼ 504.00	1	
Other (specify) ▼			
SUBTOTAL of Receipts This Page (optional)	568.00	
TOTAL This Period (last page this line numb	per only)		

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 115 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Jeffrey Kuo Mailing Address 2619 Mariella Dr City Rocklin FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Receipt For:	State CA C Occupation Diagnost	Zip Code 95765-5618	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Hank Lin Mailing Address 44408 Clubhouse Dri	ive	600.00	Date of Receipt 0 6 3 0 2 0 0 9
City	State	Zip Code	Transaction ID: 30490066
EI Macero FEC ID number of contributing federal political committee.	CA	95618-1021	Amount of Each Receipt this Period 200.00
Name of Employer Radiological Assoc. of Sa- cramento Receipt For: Primary General Other (specify) ▼	_, ' <u> </u>	n cic Radiologist e Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Don Charles Loomer			Date of Receipt
Mailing Address 1747 E Wallington Li	n		06 30 YYYYY 2009
City	State	Zip Code	Transaction ID: 30490067
Fresho FEC ID number of contributing federal political committee.	CA	93730-3596	Amount of Each Receipt this Period 200.00
Name of Employer Radiological Assoc. of Sacramento Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n cic Radiologist e Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)			600.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 115 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any per the name and address of any political committee sociation Political Action Committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Vartan Malian Mailing Address 100 Crane Meadow	, Ct	Date of Receipt
City	State Zip Code	0 6 3 0 2 0 0 9 Transaction ID: 30490068
Roseville FEC ID number of contributing federal political committee.	CA 95661-4030	Amount of Each Receipt this Period 200.00
Name of Employer Radiological Assoc. of Sacramento Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 600.00	
Full Name (Last, First, Middle Initial) Dr. Mylon Marshall Mailing Address 2201 Lassen Pl		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	Transaction ID: 30490069	
Davis	CA 95616-6604	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Charles McDonnell, III		Date of Receipt
Mailing Address 5436 Ridge Park D	r	06 30 2009
City	State Zip Code	Transaction ID: 30490070
Loomis FEC ID number of contributing federal political committee.	CA 95650-7701	Amount of Each Receipt this Period 200.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional		600.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule for each category of th Detailed Summary Pag	e (check only one)
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address of any political comn	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
American College of Radiology Assoc	lation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Miyuki Murphy Mailing Address 5198 Prior Rdg		Date of Receipt
		06 30 2009
City	State Zip Code	Transaction ID: 30490071
Granite Bay	CA 95746-7186	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Radiological Assoc. of Sa-	Occupation	
cramento Receipt For:	Diagnostic Radiologist Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	300.0	00
Full Name (Last, First, Middle Initial) Dr. Michael Norton	1	Date of Receipt
Mailing Address Rad Assoc of Sacram 1500 Expo Pkwy		06 30 2009
City	State Zip Code	Transaction ID: 30490072
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Rad Assoc of Sacramento	Occupation Diagnostic Radiologist	
Med Gr Receipt For:	Aggregate Year-to-Date ▼	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	600.0	00
Full Name (Last, First, Middle Initial) Dr. Narasimhachari Raghavan	1	Date of Receipt
Mailing Address 3157 Oak Cliff Cir		0 6 3 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 30490073
Carmichael	CA 95608-4571	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	416.68
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.0	04
SURTOTAL of Receipts This Page (entional)		716.68

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 115 (check only one) X
A 0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associated the commercial purposes.	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ . .	Full Name (Last, First, Middle Initial) Dr. Christopher Schaefer Mailing Address Radiological Assoc of	f Sacramento		Date of Receipt
	1500 Expo Pkwy			06 30 2009
	City	State CA	Zip Code	Transaction ID: 30490074
	Sacramento FEC ID number of contributing federal political committee.	CA	95815-4227	Amount of Each Receipt this Period 200.00
	Name of Employer Radiological Assoc. of Sa- cramento Receipt For: Primary General Other (specify) ▼	, ' 	n cic Radiologist e Year-to-Date ▼	
 3.	Full Name (Last, First, Middle Initial) Dr. Albert Schraner Mailing Address 5300 Tufts St	1		Date of Receipt
				06 30 2009
	City	State	Zip Code	Transaction ID: 30490075
	Davis FEC ID number of contributing federal political committee.	CA	95616-7219	Amount of Each Receipt this Period 200.00
	Name of Employer Radiological Assoc. of Sa- cramento	_,	ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
	Full Name (Last, First, Middle Initial) Dr. David Seidenwurm			Date of Receipt
	Mailing Address 2806 Hoffman Bluff V	Vay		06 30 7 9 9 9
	City	State	Zip Code	Transaction ID: 30490076
	Carmichael	CA	95608-4522	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Radiological Assoc. of Sa- cramento	_ ' 	ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
	SUBTOTAL of Receipts This Page (optional)			600.00

SCHEDULE A (FEC Form 32 ITEMIZED RECEIPTS Any information copied from such Reports and Application Schedule Appli	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 115 (check only one) X		
NAME OF COMMITTEE (In Full)	the name and address of any political committee to sociation Political Action Committee	solicit contributions from such committee.		
A. Dr. Christopher Simopoulos Mailing Address Rad Assoc of Sacr				
City	State Zip Code	0 6 3 0 2 0 0 9 Transaction ID: 30490077		
Sacramento	CA 95815-4227	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	200.00		
Name of Employer Radiological Assoc. of Sacramento Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 600.00			
Full Name (Last, First, Middle Initial) Dr. Erik Soloff Milling Address 20053 Freeze at Place	1 #400	Date of Receipt		
Mailing Address 3053 Freeport Bivo	Mailing Address 3053 Freeport Blvd #198			
City	State Zip Code	Transaction ID: 30490078		
Sacramento	CA 95818-4346	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	75.00		
Name of Employer Rad Assoc of Sacramento	Occupation Diagnostic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00			
Full Name (Last, First, Middle Initial) Dr. Susan Sompayrac	-	Date of Receipt		
Mailing Address Radiological Associ 1500 Expo Pkwy		06 30 2009		
City <u>Sacramento</u>	State Zip Code CA 95815-4227	Transaction ID: 30490079 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	200.00		
Name of Employer Radiological Assoc of Sac- ramen	Occupation Diagnostic Radiologist	1		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00			
SUBTOTAL of Receipts This Page (option:	al) >	475.00		

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 115 (check only one) X 11a
or for commercial purposes, other than using the	Statements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. James Steidler		Date of Receipt
Mailing Address 1806 Vela Pl City	State Zip Code	0 6 3 0 2 0 0 9 Transaction ID: 30490080
<u>Davis</u>	CA 95616-6760	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Bahram Varjavand		Date of Receipt
Mailing Address 1501 Chalupa PI		06 30 / 9 2009
City	State Zip Code	Transaction ID: 30490081
<u>Davis</u>	CA 95618-6757	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Calvin Wang		Date of Receipt
Mailing Address Rad Assoc of Sacran 1500 Expo Pkwy		06 30 2009
City	State Zip Code CA 95815-4227	Transaction ID: 30490082
Sacramento FEC ID number of contributing federal political committee.	CA 95815-4227	Amount of Each Receipt this Period 414.28
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1214.28	
	1	714.28

SCHEDULE A (FEC FOITEMIZED RECEIPTS	oriii 3A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82/115 (check only one)
Any information copied from such F or for commercial purposes, other the	leports and Statements may	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Ful			
American College of Radio	ogy Association Politic	al Action Committee	
Full Name (Last, First, Middle In Dr. David Winfield	itial)		Date of Receipt
Mailing Address Rad Assoc 1500 Expo	of Sacramento Pkwy		06 30 7 2009
City	State	Zip Code	Transaction ID: 30490084
Sacramento	CA	95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnost	n ic Radiologist	
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼		600.00	
Full Name (Last, First, Middle In Dr. Dylan Witt	itial)		Date of Receipt
Mailing Address 3636 Wash			06 30 7 9 9
City	State	Zip Code	Transaction ID: 30490085
<u>Davis</u>	CA	95616-5087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		600.00	
Full Name (Last, First, Middle In Dr. Benjamin Franc	itial)		Date of Receipt
	ll Assoc of Sacramento Pkwy		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 30490086
Sacramento	CA	95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer University of California	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General		300.00	7
Other (specify) ▼		300.00	1
SUBTOTAL of Receipts This Page			500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 115 (check only one) X
An	y information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any ne name and address of any political committee.	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	American College of Radiology Asso	ciation Political Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Michael Haseman		Date of Receipt
	Mailing Address 227 Selby Ranch Rd	<u> </u>	06 30 2009
	City Sacramento	State Zip Code CA 95864-5844	Transaction ID: 30490087
	FEC ID number of contributing federal political committee.	CA 93004-3044	Amount of Each Receipt this Period 200.00
	Name of Employer Radiological Assoc. of Sa- cramento Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 600.00	
	Full Name (Last, First, Middle Initial) Dr. Richard W. Myers Mailing Address 1500 Expo Parkway		Date of Receipt
	City	State Zip Code	06 30 2009
	Sacramento	CA 95815-4227	Transaction ID: 30490088 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Radiological Associates of Sacramento Receipt For: Primary General	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
	Other (specify) ▼	300.00	
	Full Name (Last, First, Middle Initial) Dr. Sharon Dutton		Date of Receipt
	Mailing Address Rad Assoc of Sacran 1500 Expo Pkwy		06 30 2009
	City	State Zip Code CA 95815-4227	Transaction ID: 30490089
	Sacramento FEC ID number of contributing federal political committee.	CA 95815-4227	Amount of Each Receipt this Period 200.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Г			500.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 115 (check only one) X 11a
A 0	ony information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Associ	ation Politic	al Action Committee	
۸.	Full Name (Last, First, Middle Initial) Dr. Roger Gilbert			Date of Receipt
	Mailing Address Rad Assoc of Sacrame 1500 Expo Pkwy	ento		06 30 2009
	City	State	Zip Code	Transaction ID: 30490090
	Sacramento	CA	95815-4227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupatio Radiation	n n Oncologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 600.00]
- 3.	Full Name (Last, First, Middle Initial) Dr. Brian Goldsmith			Date of Receipt
	Mailing Address Radiological Assoc of Sacramento 2800 L St Ste 10			06 30 7 2009
	City State Zip Code			Transaction ID: 30490095
	Sacramento FEC ID number of contributing federal political committee.	CA	95816-5616	Amount of Each Receipt this Period
	Name of Employer Radiological Assoc. of Sa- cramento	Occupatio Radiation	n n Oncologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	
. —	Full Name (Last, First, Middle Initial) Dr. Christopher Jones			Date of Receipt
	Mailing Address Radiological Assoc of 2800 L St Ste 10	Sacramento		06 30 7 2009
	City	State	Zip Code	Transaction ID: 30490096
	Sacramento FEC ID number of contributing federal political committee.	CA	95816-5616	Amount of Each Receipt this Period 160.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Radiation	n n Oncologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 480.00	
Γ,	SUBTOTAL of Receipts This Page (optional)			460.00

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 115 (check only one) X
or for	oformation copied from such Reports and S commercial purposes, other than using the NME OF COMMITTEE (In Full) merican College of Radiology Associ	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Il Name (Last, First, Middle Initial)	Tallon Politic	ai Action Committee	
<u>Dr</u>	. Susan Lee Radiological Assoc of	Sacramento)	Date of Receipt 0 6 3 0 2 0 0 9
Cit	1500 Expo Pkwy	State	Zip Code	
	acramento	CA	95815-4227	Transaction ID: 30490097 Amount of Each Receipt this Period
FE	CC ID number of contributing deral political committee.	C	33013 1 221	400.00
cra	ame of Employer adiological Assoc. of Sa- amento acceipt For: Primary General		n n Oncologist e Year-to-Date ▼ 1200.00	1
Dr <u>Dr</u>	Other (specify) ▼ II Name (Last, First, Middle Initial) . David Linstadt	0 0		Date of Receipt
Ma	Radiation Oncology Co 2 Medical Plaza Dr Ste			06 / 30 / 2009
Cit	•	State	Zip Code	Transaction ID: 30490098
FE	OSEVIIIE C ID number of contributing deral political committee.	CA	95661-3049	Amount of Each Receipt this Period 200.00
Na Ra	me of Employer adiation Oncology Centers	Occupatio Radiation	n n Oncologist	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
	II Name (Last, First, Middle Initial) . Mark Logsdon			Date of Receipt
Ma	ailing Address Rad Associates of Sac 1500 Expo Pkwy	cramento		06 30 7 2009
Cit	•	State	Zip Code	Transaction ID: 30490099
<u>Sa</u>	acramento	CA	95815-4227	Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	C		200.00
Ra <u>cra</u>	ime of Employer adiological Assoc. of Sa- amento		n Oncologist	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
SUB	TOTAL of Receipts This Page (optional)	1		800.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 115 (check only one) X 11a
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Politic	al Action Committee	
∠ A .	Full Name (Last, First, Middle Initial) Dr. Anthony Pu			Date of Receipt
	Mailing Address Radiological Assoc of 1500 Expo Pkwy	Sacramento)	06 30 2009
	City	State	Zip Code	Transaction ID: 30490100
	Sacramento	CA	95815-4227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Radiological Assoc of Sac- ramen	Occupation Radiation	n n Oncologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
– В.	Full Name (Last, First, Middle Initial) Dr. Seth Rosenthal			Date of Receipt
	Mailing Address Rad Assoc of Sacramo	ento		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 30490101
	Sacramento	CA	95815-4227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Radiation	n Oncologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
С.	Full Name (Last, First, Middle Initial) Dr. Janice Ryu			Date of Receipt
	Mailing Address 2800 L St Apt 10			06 30 2009
	City	State	Zip Code	Transaction ID: 30490102
	Sacramento	CA	95816-5616	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer	Occupatio	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
	SUBTOTAL of Receipts This Page (optional)	1		300.00
r	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 115 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee to	
American College of Radiology As	sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Suplica		Date of Receipt
Mailing Address Sutter Cancer Ctr 2800 L St Ste 10		06 30 7 2009
City	State Zip Code	Transaction ID: 30490103
Sacramento	CA 95816-5616	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer UCSF Long Hospital L-08	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Dr. Harvey Wolkov		Date of Receipt
Mailing Address Radiation Oncolog 2800 L St Ste 10		06 30 7 2009
City	State Zip Code	Transaction ID: 30490104
Sacramento	CA 95816-5616	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer Radioloical Assoc. of Sac-	Occupation Radiation Oncologist	
<u>ramento Med C</u> Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	
Full Name (Last, First, Middle Initial) Dr. John Agola		Date of Receipt
Mailing Address Medical Cntr Rads 6330 N Center Dr S		06 30 2009
City	State Zip Code	Transaction ID: 30490107
Norfolk	VA 23502-4008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Medical Center Radiologis- ts. I	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
	l)	480.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 115 (check only one) X
Α ο	ny information copied from such Reports and r for commercial purposes, other than using the	Statements magne name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Politic	al Action Committee	
	Full Name (Last, First, Middle Initial) Dr. John Donnal			Date of Receipt
	Mailing Address Medical Ctr Rads Inc 6330 N Center Dr Ste			06 30 7 2009
	City	State	Zip Code	Transaction ID: 30490108
	Norfolk FEC ID number of contributing federal political committee.	C	23502-4008	Amount of Each Receipt this Period 252.00
	Name of Employer Medical Center Radiologis- ts, I Receipt For: Primary General Other (specify) ▼	' <u> </u>	n cic Radiologist e Year-to-Date ▼ 504.00	
_	Full Name (Last, First, Middle Initial) Dr. Theodore Dorsay Mailing Address 1500 Chandon Cres			Date of Receipt
				06 30 2009
	City	State	Zip Code	Transaction ID: 30490109
	Virginia Beach	VA	23454-1367	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		240.00
	Name of Employer Medical Center Radiologis- ts. Inc.	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 480.00	
_	Full Name (Last, First, Middle Initial) Richard George Foster			Date of Receipt
	Mailing Address 307 Snowberry Circle	•		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 30490117
	Venetia	<u>PA</u>	15367-1045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self-Employed	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
		1		792.00

ITEMIZ	DULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 115 (check only one) X
or for com	nation copied from such Reports and second purposes, other than using the OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ameri	can College of Radiology Assoc	ciation Politic	al Action Committee	
Dr. Yan				Date of Receipt
	Address 1521 Mirassou Ln	•		06 30 2009
City	ia Beach	State VA	Zip Code	Transaction ID: 30490118
FEC ID	number of contributing political committee.	C	23454-1373	Amount of Each Receipt this Period 252.00
ts, Inc	of Employer Il Center Radiologis-	Occupatio Diagnost	n ic Radiologist	
Receipt P	t For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 504.00	
Dr. Lau	me (Last, First, Middle Initial) ren Granata Address 1317 Five Point Rd			Date of Receipt
iviaiiiig	Address 1317 Five Point No			06 30 2009
City		State	Zip Code	Transaction ID: 30490119
	ia Beach	VA	23454-1930	Amount of Each Receipt this Period
	number of contributing political committee.	C		252.00
Name o Medica ts	of Employer Il Center Radiologis-	Occupatio Diagnost	ⁿ ic Radiologist	
Receipt		Aggregate	e Year-to-Date ▼	
	rrimary ☐ General Other (specify) ▼		504.00	
Full Na	me (Last, First, Middle Initial) hael Ho			Date of Receipt
	Address Medical Cntr Rads Inc 6330 N Center Dr Ste			06 30 7 2009
City Norfol	k	State VA	Zip Code	Transaction ID: 30490120
FEC ID	number of contributing political committee.	C	23502-4008	Amount of Each Receipt this Period 255.00
Medica <u>ts, l</u>	of Employer Il Center Radiologis-	Occupatio Diagnost	n ic Radiologist	
Receipt P	t For: rimary General 0ther (specify) ♥	Aggregate	e Year-to-Date ▼ 510.00	
SUBTOT	AL of Receipts This Page (optional) .	1		759.00

	PULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 115 (check only one) X
or for comm	ation copied from such Reports and S nercial purposes, other than using the DF COMMITTEE (In Full) can College of Radiology Associ	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Nar Dr. Leste	ne (Last, First, Middle Initial) er Johnson Address 1021 Downshire Chase			Date of Receipt
City		State	Zip Code	0 6 3 0 2 0 0 9 Transaction ID: 30490121
FEC ID	a Beach number of contributing political committee.	C	23452-6154	Amount of Each Receipt this Period 249.99
ts, Inc. Receipt	f Employer Center Radiologis- For: rimary General ther (specify) ▼	,	n cic Radiologist e Year-to-Date ▼ 499.98	
Dr. Yoor	ne (Last, First, Middle Initial) nah Kim Address 917 Kings Cross			Date of Receipt 0 6 3 0 2 0 0 9
City		State	Zip Code	Transaction ID: 30490122
FEC ID	a Beach number of contributing political committee.	C	23452-6230	Amount of Each Receipt this Period 252.00
Medical <u>ts, Inc</u>	f Employer Center Radiologis-	,	ic Radiologist	
	For: rimary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 504.00	
	ne (Last, First, Middle Initial) ip Luebbert			Date of Receipt
Mailing	Address 9528 25th Bay St			06 30 2009
City		State	Zip Code	Transaction ID: 30490123
	number of contributing political committee.	C	23518-1812	Amount of Each Receipt this Period 252.00
Name o Medical ts	f Employer Center Radiologis-	Occupatio Diagnost	n ric Radiologist	
Receipt Pr	For: rimary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 504.00	
SUBTOTA	AL of Receipts This Page (optional)	1)	753.99

SCHEDULE A (FEC FOITEMIZED RECEIPTS	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 115 (check only one) X 11a
or for commercial purposes, other	han using the name and ac ll)	ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American College of Radio	logy Association Politic	cal Action Committee	
Full Name (Last, First, Middle In Dr. Susan McKenzie	,		Date of Receipt
	Rads Inc Bldg 13 nter Dr Ste 220		06 30 2009
City	State	Zip Code	Transaction ID: 30490124
Norfolk	VA	23502-4008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		252.00
Name of Employer Medical Center Radiologis- ts, I	Occupation Diagnos	on stic Radiologist	
Receipt For: Primary Genera Other (specify) ▼	Aggregat	te Year-to-Date ▼ 504.00	
Full Name (Last, First, Middle II Dr. Eveleen Oleinik	itial)		Date of Receipt
Mailing Address 1021 Dowr	shire Chase		06 30 Y Y Y Y Y
City	State	Zip Code	Transaction ID: 30490125
Virginia Beach FEC ID number of contributing federal political committee.	C	23452-6154	Amount of Each Receipt this Period 125.01
Name of Employer Medical Center Radiologis- ts, Inc	Occupation Diagnos	on stic Radiologist	
Receipt For: Primary Genera Other (specify) ▼	Aggregat	te Year-to-Date ▼ 250.02	
Full Name (Last, First, Middle In Dr. Adam Specht	itial)		Date of Receipt
Mailing Address 3309 Chap	pell Pl		0 6 3 0 2 0 0 9
City	State	Zip Code	Transaction ID: 30490126
Virginia Beach	VA	23452-6290	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		252.00
Name of Employer Medical Center Radiologis- ts, Inc	Occupation Diagnos	on stic Radiologist	
Receipt For: Primary Genera Other (specify) ▼	00 0	te Year-to-Date ▼ 504.00	
SUBTOTAL of Receipts This Page			629.01

FEC ID number of contributing federal political committee. Name of Employer Medical Center Radiologis- ts. Inc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Harlan Vingan Mailing Address Medical Center Radiologists, Inc 6330 N Center Dr Bldg 13 Ste 220 City State Zip Code Transaction II Norfolk VA 23502-4101 Name of Employer Medical Center Radiologis- ts. Inc. Receipt For: Primary General Coccupation Diagnostic Radiologist St. Inc. Receipt For: Primary General Occupation Diagnostic Radiologist St. Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Date of Receipt Aggregate Year-to-Date ▼ Date of Receipt Transaction II Amount of Eac Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Date of Receipt Date of Receipt Transaction II Amount of Eac Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver	t 3 0
American College of Radiology Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Richard Thomas Mailing Address 1037 Long Beeches Ave City Chesapeake VA 23320-0681 FEC ID number of contributing federal political committee. Name of Employer Medical Center Radiologis- Is, Inc. Receipt For: Primary Other (specify) ▼ Parall Name (Last, First, Middle Initial) Dr. Harlan Vingan Mailing Address Medical Center Radiologists, Inc 6330 N Center Dr Bldg 13 Ste 220 City Norfolk VA 23502-4101 Amount of Eac Transaction II Amount of Eac Date of Receipt For: C Name of Employer Medical Center Radiologists, Inc 6330 N Center Dr Bldg 13 Ste 220 City Norfolk VA 23502-4101 Amount of Eac Transaction II Amount of Eac Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Transaction II Amount of Eac FEC ID number of contributing federal political committee. C Name of Employer Medical Center Radiologis- Is, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Date of Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver	3 0 2 0 0 9 2 0 0 9 2 0 0 9 2 0 0 0 0 0 0
Date of Receip Mailing Address 1037 Long Beeches Ave City State Zip Code VA 23320-0681 FEC ID number of contributing federal political committee. Name of Employer Medical Center Radiologists, Inc. Receipt For: Primary General Other (specify) ▼	3 0 2 0 0 9 2 0 0 9 2 0 0 9 2 0 0 0 0 0 0
City State Zip Code Chesapeake VA 23320-0681 FEC ID number of contributing federal political committee. Name of Employer Medical Center Radiologists, Inc. Receipt For: Primary General Other (specify) ▼ Name of Employer Medical Center Radiologists, Inc 6330 N Center Dr Bldg 13 Ste 220 City State Zip Code Transaction II Amount of Ear Date of Receipt Mailing Address Medical Center Radiologists, Inc 6330 N Center Dr Bldg 13 Ste 220 City State Zip Code Transaction II Amount of Ear Date of Receipt For Internation II Amount of Ear Date of Receipt For Internation II Amount of Ear Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Diagnostic Radiologist Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Date of Receipt For Receipt For: Primary General Other (specify) ▼ Date of Receipt For Receipt For: Primary General Other (specify) ▼ Date of Receipt For Receipt For: Primary General Other (specify) ▼ Date of Receipt For Receipt For Receipt For: Primary General Other (specify) ▼ Date of Receipt For Receipt For Receipt For Receipt For Receipt For: Primary General Other (specify) ▼ Date of Receipt For	3 0 2 0 0 9 9: 30490127 h Receipt this Period 150.00
Chesapeake Chesapeake FEC ID number of contributing federal political committee. Name of Employer Medical Center Radiologists, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Harlan Vingan Norfolk FEC ID number of contributing federal political committee. Name of Employer Medical Center Radiologists, Inc. Receipt For: Primary General Other (specify) ▼ State Zip Code Transaction II Amount of Eac Amount of Eac Amount of Eac Amount of Eac Transaction II Amount of Eac Amount of Eac Aggregate Year-to-Date ▼ Transaction II Amount of Eac Aggregate Year-to-Date ▼ Transaction II Amount of Eac FEC ID number of contributing federal political committee. C Name of Employer Medical Center Radiologis- Is, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Date of Receipt Amount of Eac Factor Aggregate Year-to-Date Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Date of Receipt Date of Receipt Amount of Eac Factor Amount of Eac Factor Aggregate Year-to-Date Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver	h Receipt this Period 150.00
FEC ID number of contributing federal political committee. Name of Employer Medical Center Radiologists, Inc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Harlan Vingan Mailing Address Medical Center Radiologists, Inc 6330 N Center Dr Bldg 13 Ste 220 City State Zip Code Norfolk VA 23502-4101 FEC ID number of contributing federal political committee. Name of Employer Medical Center Radiologists, Inc. Receipt For: Primary General Occupation Diagnostic Radiologist sts. Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Date of Receipt State Zip Code VA 23502-4101 Amount of Eact State Zip Code VA 23502-4101 Amount of Eact State St	150.00
ts, Inc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Harlan Vingan Mailing Address Medical Center Radiologists, Inc 6330 N Center Dr Bldg 13 Ste 220 City State Zip Code Norfolk VA 23502-4101 FEC ID number of contributing federal political committee. Name of Employer Medical Center Radiologists, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Date of Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Date of Receipt For: Aggregate Year-to-Date ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Date of	
Dr. Harlan Vingan Mailing Address Medical Center Radiologists, Inc 6330 N Center Dr Bldg 13 Ste 220 City State Zip Code Norfolk VA 23502-4101 FEC ID number of contributing federal political committee. Name of Employer Medical Center Radiologists, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Date of Receipt Medical Center Radiologists, Inc. Aggregate Zip Code Transaction II Amount of Each Aggregate Year-to-Date ▼ 504.00 Date of Receipt Transaction II Amount of Each Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver	
City State Zip Code Norfolk VA 23502-4101 FEC ID number of contributing federal political committee. Name of Employer Medical Center Radiologists, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Other (Specify) ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Sold-Other (Specify) ▼ Date of Receipt Recei	D / Y Y Y Y
Norfolk FEC ID number of contributing federal political committee. Name of Employer Medical Center Radiologists, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Amount of Eac Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 504.00 Date of Receipt	30 2009
FEC ID number of contributing federal political committee. Name of Employer Medical Center Radiologists, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Doccupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 504.00 Date of Receipt For: Diagnostic Radiologist Aggregate Year-to-Date ▼ Date of Receipt For: Diagnostic Radiologist Aggregate Year-to-Date ▼ Date of Receipt For: Diagnostic Radiologist	: 30490128
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Occupation Diagnostic Radiologist Aggregate Year-to-Date Sold.00 Date of Receipt Date of Receipt Date of Receipt	h Receipt this Period
Medical Center Radiologis- ts, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Diagnostic Radiologist Aggregate Year-to-Date ▼ 504.00 Date of Receipt	252.00
Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ 504.00 Full Name (Last, First, Middle Initial) Dr. Jennifer Weaver Date of Receipt	
Dr. Jennifer Weaver Date of Receip	
Moiling Address 4000 Assembly Du	t
Mailing Address 1029 Assembly Dr	30
City State Zip Code Transaction II	
	h Receipt this Period
FEC ID number of contributing federal political committee.	300.00
Name of Employer Medical Center Radiologis- ts Occupation Diagnostic Radiologist	
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)	
SOBTOTAL OF Receipts This Page (optional)	702.00

В.

PAGE 93 / 115 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Radiology Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Marshall Weissberger Date of Receipt Mailing Address Medical Center Radiologists 06 3 0 2009 6330 N Center Dr Bldg 13 Ste 220 City State Zip Code Transaction ID: 30490130 Norfolk VA 23502-4101 Amount of Each Receipt this Period FEC ID number of contributing 252.00 C federal political committee. Name of Employer Medical Center Radiologis-Occupation Diagnostic Radiologist ts, Inc. Receipt For: Aggregate Year-to-Date General Primary 504.00 Other (specify) Full Name (Last, First, Middle Initial) Dr. John Whitbeck Date of Receipt Mailing Address Medical Cntr Rads Inc Bldg 13 0 6 30 2009 6330 N Center Dr Ste 220 City State Zip Code Transaction ID: 30490131 Norfolk V٨ 23502-4008 Amount of Each Receipt this Period FEC ID number of contributing C 126.00 federal political committee. Name of Employer Medical Center Radiologis-Occupation Diagnostic Radiologist ts, I Receipt For: Aggregate Year-to-Date ▼ Primary General

252.00

SUBTOTAL of Receipts This Page (optional)	•	378.00
TOTAL This Period (last page this line number only)	<u> </u>	53729.71

Other (specify)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 115 (check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
American College of Radiology Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Vanguard		Date of Receipt
Mailing Address PO Box 13750		06 30 7 2009
City	State Zip Code	Transaction ID: 30659743
Philadelphia	PA 19101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.23
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 645.00	Interest

SUBTOTAL of Receipts This Page (optional)	•	41.23
TOTAL This Period (last page this line number only)		41.23

ITE	HEDULE B (FEC Form 3.	² Use sepa	arate schedule(s)		NUMBER: PAGE 95 / 115
	MIZED DISBURSEMENT	S for each	category of the Summary Page	(check only	y one) 22 X 23 24 25 28a 28b 28c 29 1
	Information copied from such Reports ar r commercial purposes, other than using			d by any person f	for the purpose of soliciting contributions
/ /	NAME OF COMMITTEE (In Full) American College of Radiology Ass				ion contributions from cash committee
	Full Name (Last, First, Middle Initial) Heller For Congress				Transaction ID: 29886696 Date of Disbursement
N	Mailing Address PO Box 750580				$\begin{bmatrix}\begin{smallmatrix}M\\06\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\24\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}Y\\2009\end{smallmatrix}\end{bmatrix}^Y$
	City Las Vegas	State NV	Zip Code 89136		Amount of Each Disbursement this Period
_	Purpose of Disbursement			011	1500.00
N	Candidate Name Mr. Dean Heller			Category/ Type	
	Office Sought: X House Senate President State: NV District: 02	Disbursement For: X Primary Other (spe	2010 General ecify) ▼		
F	Full Name (Last, First, Middle Initial) John D. Dingell For Congress Com	mittee			Transaction ID: 29887115 Date of Disbursement
N	Mailing Address 607 14th Street N Suite 800	1.W.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & O \\ Y & Y & O & O & O \end{bmatrix}^Y$
	City Washington	State DC	Zip Code 20005		Amount of Each Disbursement this Perio
_	Purpose of Disbursement			011	1000.00
	Candidate Name Rep. John D. Dingell			Category/ Type	
_		D: 1	2010		
Ċ	Senate President	Disbursement For: X Primary Other (spe	General		
S	Senate	X Primary Other (spe	General		Transaction ID: 29887117 Date of Disbursement
S F (Senate President State: MI District: 15 Full Name (Last, First, Middle Initial)	X Primary Other (spe	General		
F C	Senate President State: MI District: 15 Full Name (Last, First, Middle Initial) Gene Green Congressional Campa	X Primary Other (spe	General		Date of Disbursement M 6 M / D 3 / Y Y Y O 9 Amount of Each Disbursement this Perio
S F C M	Senate President District: 15 Full Name (Last, First, Middle Initial) Gene Green Congressional Campa Mailing Address PO Box 16128 City Houston Purpose of Disbursement	X Primary Other (spe	General ecify) ▼ Zip Code	011	Date of Disbursement O 6 O 3 O 9
F C C F F F F F F F F F F F F F F F F F	Senate President District: 15 Full Name (Last, First, Middle Initial) Gene Green Congressional Campa Mailing Address PO Box 16128 City Houston Purpose of Disbursement Candidate Name Rep. Gene Green	X Primary Other (spe	General ecify) ▼ Zip Code 77222	011 Category/ Type	Date of Disbursement M 6 M / D 3 D / Y Y Y O 9 P Amount of Each Disbursement this Period
F C C F C C C C C C C C C C C C C C C C	Senate President District: 15 Full Name (Last, First, Middle Initial) Gene Green Congressional Campa Mailing Address PO Box 16128 City Houston Purpose of Disbursement Candidate Name Rep. Gene Green	X Primary Other (spe	General ecify) ▼ Zip Code 77222 2010 General	Category/	Date of Disbursement M 6 M / D 3 D / Y Y Y O 9 Y Amount of Each Disbursement this Period

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SCHEDULE B (FEC Form 3X)	HEDIII E B (FEC Form 3X)	LEODLINE	DAGE	- 00 /	115			
· · ·	Use separate schedule(s)	FOR LINE (check only			PAGE	96 /	115	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27			24 28c	25 29		26 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the na							3	
NAME OF COMMITTEE (In Full)								
American College of Radiology Association	on Political Action Committe	ee						
Full Name (Last, First, Middle Initial) Nelson For U S Senate			Transaction Date of Disl	-		0		
Mailing Address PO Box 8666			06	^D 0 3	/ Y	ž 0 ŏ 9) Y	
City Omaha	State Zip Code NE 68108		Amount of E	Each Disb	ourseme	nt this I	Perio	nd .
Purpose of Disbursement		011			10	000.00)	
Candidate Name Sen. Ben Nelson		Category/ Type						
X Senate President	sement For: 2012 X Primary General Other (specify)							
State: NE District:								
Full Name (Last, First, Middle Initial) Kendrick Meek For Florida			Transaction Date of Disl	bursemen	nt			
Mailing Address 111 Nw 183rd Street S	uite 325		06	15	/ Y	žoŏs) Y	
City Miami	State Zip Code FL 33169		Amount of E	Each Disb		-	_	od .
Purpose of Disbursement		011			50	00.00)	_
Candidate Name Mr. Kendrick Meek		Category/ Type						
χ Senate President	sement For: 2010 X Primary General Other (specify)							
State: FL District:								
Full Name (Last, First, Middle Initial) CAPPAC			Transaction Date of Disl	bursemen	nt			
Mailing Address 38 IVY ST SE			06	^D 0 5	/ Y	žoŏs) Y	
City WASHINGTON	State Zip Code DC 20003		Amount of E	Each Disb	ourseme	nt this I	Perio	nd .
Purpose of Disbursement		011			2	500.00)	
Candidate Name CAPPAC	1	Category/ Type						
Senate President	sement For: Primary General Other (specify)							
State: District:								
SUBTOTAL of Disbursements This Page (optional))			85	500.00		
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TOTAL This Period (last page this line number only)

		Use separate schedule(s)		FO (ch	eck on	ly one)						115
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		Ì	21b 27	22 28a	Х	23 28b		24 28c	25 29	
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) American College of Radiology Association	e and address of any political	comi									
\mathbb{L}		Tr ontical Action Commit				ı						
.	Full Name (Last, First, Middle Initial) Demint For Senate Committee Inc Mailing Address PO Box 12425					1	of D	isburs		0584 t /	22 2 0 0	9 Y
	City	State Zip Code				Amoi	ınt o	f Fach	n Dish	ursem	ent this	Period
	Columbia	SC 29211						Laoi		-		
	Purpose of Disbursement			011		L.		_		•	5000.0	10
	Candidate Name Sen. James W. DeMint			tego Type								
	X Senate X President	ement For: 2010 Primary General Other (specify)										
	State: SC District: Full Name (Last, First, Middle Initial)					_						
	Price For Congress					_		on ID isburs		0688 t		Y
	Mailing Address P.O. Box 425					0 6) 1	Ĺ	žoŏ	9
	City Roswell	State Zip Code GA 30077				Amo	unt o	f Each	n Disb			Period
	Purpose of Disbursement			011		L.		-			2500.0	00
	Candidate Name Rep. Thomas Price			tegα Γγρε	•							
	X III	ement For: 2010 Primary General Other (specify)										
	Full Name (Last, First, Middle Initial) Schiff For Congress					_	of D	isburs	emen	0808 t		
	Mailing Address 777 S. Figueroa St. Suite 4050					0 6	М	[/]	0 6	/ L	žoŏ	9
	City Los Angeles	State Zip Code CA 90017				Amo	unt o	f Each	n Dist	ursem	ent this	Period
	Purpose of Disbursement			011		L.					1000.0	0
	Candidate Name Rep. Adam Schiff		Ca	tego Type	ory/							
	X	ement For: 2010 Primary General Other (specify)		-								
Г	DISTITUTE 23							-			500.0	

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C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 98 / 115
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	7 one) 22
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	and address or any political	Committee to so	nicit continuations from such committee
American College of Radiology Association	Political Action Commit	ttee	
Full Name (Last, First, Middle Initial)			Transaction ID: 30083981
Charlie Crist For Us Senate			Date of Disbursement
Mailing Address PO Box 1694			$\begin{bmatrix} M & M & M \\ O & G & M \end{bmatrix} / \begin{bmatrix} D & D \\ O & G \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ Z & O & O & G \end{bmatrix}$
•	tate Zip Code L 32302		Amount of Each Disbursement this Period
Purpose of Disbursement		• •	5000.00
Candidate Name Charlie Crist		011 Category/ Type	
President	nent For: 2010 Primary General Other (specify)	.,	
State: FL District: Full Name (Last, First, Middle Initial)			
Donna Christensen Campaign			Transaction ID: 30169957 Date of Disbursement
Mailing Address PO Box 5197			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & O & 9 \end{smallmatrix} \end{bmatrix}$
•	tate Zip Code /I 00823		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1500.00
Candidate Name Rep. Donna Christensen		Category/ Type	
	nent For: 2010 Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Friends Of John Tanner			Transaction ID: 30175900 Date of Disbursement
Mailing Address Post Office Box 1994			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & O \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Q & O & O \end{smallmatrix} \end{bmatrix} \ \end{bmatrix}$
	tate Zip Code N 38281		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1500.00
Candidate Name Rep. John S. Tanner		Category/ Type	
	nent For: 2010 Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional)			8000.00
TOTAL This Period (last page this line number only) .			

		Use separate schedule(s)	(check on	
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 3
	y Information copied from such Reports and State for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) American College of Radiology Association	e and address of any political co	ommittee to so	
\mathbb{Z}		Tr ontical Action Committee		
Α.	Full Name (Last, First, Middle Initial) Allyson Schwartz For Congress Mailing Address P.O. Box 2232			Transaction ID: 30175996 Date of Disbursement M M D D D Y Y Y O O 9
	City Jenkintown	State Zip Code PA 19046		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	2000.00
	Candidate Name Rep. Allyson Schwartz		Category/ Type	
	Office Sought: X House Senate President State: PA District: 13	ement For: 2010 Primary General Other (specify)		
 3.	Full Name (Last, First, Middle Initial) Friends Of Carolyn Mccarthy			Transaction ID: 30176583 Date of Disbursement
	Mailing Address 151 Linden Road			06 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	City Mineola	State Zip Code NY 11501		Amount of Each Disbursement this Period
	Purpose of Disbursement Candidate Name Rep. Carolyn McCarthy	[011 Category/	3000.00
	Office Sought: X House Disburs	ement For: 2010 Primary General Other (specify)	Туре	
 C.	Full Name (Last, First, Middle Initial) Richard Burr Committee			Transaction ID: 30177294 Date of Disbursement
	Mailing Address Post Office Box 5928			06 06 7 04 7 2009
	City Winston-Salem	State Zip Code NC 27113		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	500.00
	Candidate Name Sen. Richard M. Burr	'	Category/ Type	
		ement For: 2010		
	Office Sought: House X Senate President State: NC Disburs Disburs Disburs Disburs	Primary General Other (specify)		

SCHEDIII E B (FEC Form 3Y)

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s) FOR LINE (check only	NUMBER: PAGE 100 / 115
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
ny Information copied from such Reports and State r for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
American College of Radiology Association	on Political Action Comm	ittee	
Full Name (Last, First, Middle Initial) Richard Burr Committee			Transaction ID: 30177717 Date of Disbursement
Mailing Address Post Office Box 5928			$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & A \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & Y \\ Y & Z & O & O & Y \end{bmatrix}$
City Winston-Salem	State Zip Code NC 27113		Amount of Each Disbursement this Period
Purpose of Disbursement			2000.00
Candidate Name Sen. Richard M. Burr		011 Category/ Type	
Office Sought: X Senate President State: NC District:	sement For: 2007 Primary X General Other (specify) ▼	.,,,,,	
Full Name (Last, First, Middle Initial)			Transaction ID: 30178140
Jackie Speier For Congress			Date of Disbursement
Mailing Address PO Box 112			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} & \begin{smallmatrix} M \\ O \end{smallmatrix} & \begin{smallmatrix} D \\ O \end{smallmatrix} & \begin{smallmatrix} D \\ O \end{smallmatrix} & \begin{smallmatrix} D \\ O \end{smallmatrix} & \begin{smallmatrix} Y \\$
City Burlingame	State Zip Code CA 94011		Amount of Each Disbursement this Peri
Purpose of Disbursement			1000.00
Candidate Name Jackie Speier		011 Category/ Type	
	sement For: 2010 X Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Dave Camp For Congress			Transaction ID: 30178706 Date of Disbursement
Mailing Address 5915 Eastman Ave. S	uite 100		$\begin{bmatrix} \begin{smallmatrix} M \\ 0 \end{smallmatrix} \begin{bmatrix} 6 \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} D \\ 0 \end{smallmatrix} \begin{bmatrix} 9 \\ \end{bmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{bmatrix} 2 \\ 0 \end{smallmatrix} \begin{bmatrix} 9 \\ \end{bmatrix} \end{bmatrix}$
City Midland	State Zip Code MI 48640		Amount of Each Disbursement this Peri
Purpose of Disbursement		011	1000.00
Candidate Name Rep. David Lee Camp		Category/ Type	
9 1	sement For: 2010 X Primary General Other (specify) ▼		
	n		4000.00
SUBTOTAL of Disbursements This Page (optional	1)	······	1000100
FOTAL This Period (last page this line number on	y)	>	

TEMIZED D	B (FEC Form 3	′ Use sep	arate schedule(s)	FOR LINE (check only	
	ISBURSEMENT	for each Detailed	category of the Summary Page	21b 27	22 X 23 24 25 2 28a 28b 28c 29
					or the purpose of soliciting contributions licit contributions from such committee
NAME OF COM	MMITTEE (In Full) lege of Radiology As	-			
Full Name (Last Berkley For C	, First, Middle Initial) Congress				Transaction ID: 30185289 Date of Disbursement
Mailing Address	3069 Conquista	Court			$\begin{bmatrix}\begin{smallmatrix}M\\06\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\10\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}Y\\2009\end{smallmatrix}\end{bmatrix}^Y$
City Las Vegas		State NV	Zip Code 89121		Amount of Each Disbursement this Perio
Purpose of Disb				011	2000.00
Candidate Name Rep. Shelley	Berkley			Category/ Type	
Office Sought:	X House Senate President	Disbursement For: X Primary Other (sp	2010 General ecify) ▼		
•	District: 01 , First, Middle Initial)				Transaction ID: 30218457
Friends Of Jir Mailing Address					Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	PO BOX 12567				
City Columbia		State SC	Zip Code 29211		Amount of Each Disbursement this Perio
Purpose of Disb				011	2500.00
Rep. James (Category/ Type	
Office Sought: State: SC	X House Senate President District: 06	Disbursement For: X Primary Other (sp	2010 General ecify) ▼		
Full Name (Last	First, Middle Initial) For Congress Com	mittee			Transaction ID: 30218461 Date of Disbursement
Mailing Address	Post Office Box PO Box 28001	28001			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & I \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & Q \\ Q & Q & Q & Q \end{bmatrix} $
City Raleigh		State NC	Zip Code 27611		Amount of Each Disbursement this Perio
Purpose of Disb			011		1000.00
Candidate Name Rep. Bob Eth				Category/ Type	
Office Sought:	X House Senate President	Disbursement For: X Primary Other (sp	2010 General ecify)		
	Diatriot: 02				
State: NC	District: 02				

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	(check only	NUMBER: PAGE 102/115
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) American College of Radiology Associati	on Political Action Committ	ee	
Full Name (Last, First, Middle Initial) Ryan For Congress			Transaction ID: 30218568 Date of Disbursement
Mailing Address P. O. Box 1919			$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & G \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & I \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & D & Q \end{smallmatrix} \end{bmatrix} \ \mathbf{Y}$
City Janesville	State Zip Code WI 53547		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1500.00
Candidate Name Rep. Paul Ryan		Category/ Type	
Senate President	sement For: 2010 K Primary General Other (specify)		
State: WI District: 01 Full Name (Last, First, Middle Initial)			T
Friends Of Lois Capps			Transaction ID: 30218578 Date of Disbursement
Mailing Address PO Box 23940			$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} D & D \\ D & G \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & D & G \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & G & G & G \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ G & G & G & G \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ G & G & G & G \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ G & G & G & G \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ G & G & G & G \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ G & G & G \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ G & G & G \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ G & G & G \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ G & G & G \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ G & G & G \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ G & G & G \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ G & G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y \\ G \end{bmatrix} \begin{bmatrix} Y & Y \\ G & G \end{bmatrix} \begin{bmatrix} Y \\ G \end{bmatrix} \begin{bmatrix} Y & Y \\ G \end{bmatrix} \begin{bmatrix} Y \\ G \end{bmatrix} \begin{bmatrix} Y & Y \\ G \end{bmatrix} \begin{bmatrix} Y \\ G \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \end{bmatrix} \begin{bmatrix} Y \\ Y$
City Santa Barbara	State Zip Code CA 93121		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	1500.00
Candidate Name Rep. Lois Capps		Category/ Type	
Senate President	sement For: 2010 K Primary General Other (specify)		
State: CA District: 23 Full Name (Last, First, Middle Initial) Wally Herger For Congress Committee			Transaction ID: 30219224 Date of Disbursement
Mailing Address P.O. Box 1500			$\begin{bmatrix} \begin{smallmatrix} M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D \\ I & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y \\ I & I & G \end{smallmatrix} \end{bmatrix} $
City Chico	State Zip Code CA 95927		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2000.00
Candidate Name Rep. Wally Herger		Category/ Type	
Senate President	sement For: 2010 X Primary General Other (specify)		
State: CA District: 02			
SUBTOTAL of Disbursements This Page (optiona			5000.00

	Use separate schedule(s)	(check only one)
ITEMIZED DISBURSEMENT	Detailed Summary Page	21b 22 X 23 24 25 27 28a 28b 28c 29
	g the name and address of any politica	ed by any person for the purpose of soliciting contributions al committee to solicit contributions from such committee
American College of Hadiology As	SSOCIATION FOILICAI ACTION COMM	intee
Full Name (Last, First, Middle Initial) Kagen 4 Congress Mailing Address 100 W. College 50 D	Ave.	Transaction ID: 30219654 Date of Disbursement 0 6 M / D 1 6 / Y Y Y 0 Y 9 Y
City Appleton	State Zip Code WI 54911	Amount of Each Disbursement this Per
Purpose of Disbursement		011
Candidate Name Rep. Steve Kagen		Category/ Type
Office Sought: X House Senate President	Disbursement For: 2010 X Primary General Other (specify)	
State: WI District: 08 Full Name (Last, First, Middle Initial)		
Boyd For Congress		Transaction ID: 30219659 Date of Disbursement
Mailing Address P.O. Box 15703		06 16 7 2009
City Tallahassee	State Zip Code FL 32317	Amount of Each Disbursement this Per
Purpose of Disbursement Candidate Name		011 Category/
Mr. F Allen Boyd		Туре
Office Sought: X House Senate President State: FL District: 02	Disbursement For: 2010 X Primary General Other (specify)	
Full Name (Last, First, Middle Initial) Souder For Congress Inc.		Transaction ID: 30219669 Date of Disbursement
Mailing Address P.O. Box 40233		06 17 2009
City Fort Wayne	State Zip Code IN 46804	Amount of Each Disbursement this Per
Purpose of Disbursement		011
Candidate Name Rep. Mark Souder		Category/ Type
Office Sought: X House Senate President	Disbursement For: 2010 X Primary General Other (specify)	
State: IN District: 03		
State: IN District: 03		

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	Full Name (Last, First, Middle Initial) Boyd For Congress					Date	of Di	sburs			'2 2 0 0 9	a Y
	Mailing Address P.O. Box 15703 City Tallahassee	State Zip Code FL 32317								urseme	ent this	Period
	Purpose of Disbursement Candidate Name Mr. F Allen Boyd		Ca	011 tego ype	ory/	<u> </u>		•		·	000.00	,
	<u></u>	ement For: 2010 Primary General Other (specify)		760								
	Full Name (Last, First, Middle Initial) Senate Victory Fund Mailing Address P.O. Box 7274							sburs			'5 2 0 0 9	9 ^Y
	City Tupelo Purpose of Disbursement Candidate Name	State Zip Code MS 38802		D11		Amou	unt of	f Each	Disb		ent this	
	Senate Victory Fund Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)		уре	-							
	Full Name (Last, First, Middle Initial) Andre Carson For Congress					Date		sburs	emen			Y
	Mailing Address 2527 North Alabama Str	eet State Zip Code				0 6	unt of		Pich		ž 0 0 s	
	Indianapolis Purpose of Disbursement	IN 46205			_	Amot	arit O	Laci	DISD		000.00	
	Candidate Name Andre Carson		Ca	011 tego Type	ory/							
	9 7	ement For: 2010 Primary General Other (specify)										
	UBTOTAL of Disbursements This Page (optional)				•			*		6	500.00)

SCHEDULE B (FEC Form 3X)	Use separate schedule(s) (check or	E NUMBER: PAGE 105 / 115
FEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page 21b 27	22 X 23 24 25 28 28a 28b 28c 29
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NAME OF COMMITTEE (In Full) American College of Radiology Association	,, , , , , , , , , , , , , , , , , , ,	iolok sakikisakione irom saan sakikike
American College of Hadiology Associatio	n Fontical Action Committee	
Full Name (Last, First, Middle Initial) Friends Of Schumer		Transaction ID: 30219828 Date of Disbursement
Mailing Address 509 Madison Ave Suite	1902	06 7 25 7 2009
City New York	State Zip Code NY 10022	Amount of Each Disbursement this Period
Purpose of Disbursement	011	1500.00
Candidate Name Sen. Charles Schumer	Category/ Type	
· — — —	ement For: 2010 Primary General Other (specify)	
State: NY District:		
Full Name (Last, First, Middle Initial) Tim Murphy For Congress		Transaction ID: 30219829 Date of Disbursement
Mailing Address PO Box 24551		06 16 7 2009
City Pttsburgh	State Zip Code PA 15234	Amount of Each Disbursement this Perio
Purpose of Disbursement	011	1000.00
Candidate Name Rep. Tim F. Murphy	Category/ Type	
Senate X President	ement For: 2010 Primary General Other (specify)	
State: PA District: 18 Full Name (Last, First, Middle Initial)		T .: ID .00040000
Forward Together PAC		Transaction ID: 30219830 Date of Disbursement
Mailing Address 201 North Union Street Suite 300		06 7 25 7 2009
City Alexandria	State Zip Code VA 22314	Amount of Each Disbursement this Perio
Purpose of Disbursement	011	1000.00
Candidate Name Forward Together PAC	Category/ Type	
Senate President	ement For: Primary General Other (specify) ▼	
State: District:		
State: District: SUBTOTAL of Disbursements This Page (optional)	>	3500.00

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NAME OF COMMITTEE (In Full) American College of Radiology Associatio	n Political Action Comm	ittee)										
Full Name (Last, First, Middle Initial) We The People PAC									30 emen)219 t	831		
Mailing Address P.O. Box 2232					0 6	3 ^M	/	^D 1	^D 7	/ Y	ž	o ŏ 9	Y
City Jenkintown	State Zip Code PA 19046				Amo	ount (of E	ach	Disb	ursei	ment		-
Purpose of Disbursement			011								250	0.00	
Candidate Name We The People PAC			atego Typo	-									
Senate President	ement For: Primary General Other (specify)												
State: District: Full Name (Last, First, Middle Initial) Common Sense Common Solutions PAC					_				30 emen	219 t	834		
Mailing Address 901 N Washington St Suite 300					o ^M 6		/	^D 0	3	/ Y	ž	o ŏ 9	Y
	State Zip Code VA 22314				Amo	ount (of E	ach	Disb	urse	ment	this P	eriod
Purpose of Disbursement			011								100	0.00	_
Candidate Name Common Sense Common Solutions PAC			atego Typo	•									
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)												
Full Name (Last, First, Middle Initial) Michael Burgess For Congress					Date	of D		ourse	emen	224 t			
Mailing Address PO Box 2334					o ^M 6	8 M	/	□0	9	/ L	ž (o ŏ 9	Y
City Denton	State Zip Code TX 76202				Amo	ount (of E	ach	Disb	urse	ment		-
Purpose of Disbursement			011		1000.0		0.00						
Candidate Name Rep. Michael C. Burgess, M.D.	0.0	atego Type	-										
· -	ement For: 2010 Primary General Other (specify)												
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SUBTOTAL of Disbursements This Page (optional)				•							450	0.00	

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	(check only	NUMBER: PAGE 107/115
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full) American College of Radiology Association	on Political Action Commi	ttee	
Full Name (Last, First, Middle Initial) Donna Christensen Campaign			Transaction ID: 30246367 Date of Disbursement
Mailing Address PO Box 5197			06 16 7 2009
City St. Croix	State Zip Code VI 00823		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name Rep. Donna Christensen		Category/ Type	
Senate President	ement For: 2010 ☐ Primary ☐ General ☐ Other (specify) ▼		
State: VI District: 01 Full Name (Last, First, Middle Initial)			Transaction ID: 30246378
Buckeye Liberty PAC			Date of Disbursement
Mailing Address 1155 21st Street, NW Suite 300			$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & P \end{bmatrix}$
City Washington	State Zip Code DC 20036		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	1500.00
Candidate Name Buckeye Liberty PAC		Category/ Type	
Office Sought: House Disburs	ement For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Congressman Waxman Campaign Comn	nittee		Transaction ID: 30248189 Date of Disbursement
Mailing Address 6380 Wilshire Blvd. #16	12		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & Y \\ Q & O & O & Y \end{bmatrix}$
City Los Angeles	State Zip Code CA 90048		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2500.00
Candidate Name Rep. Henry A. Waxman		Category/ Type	
Senate President	ement For: 2010 Primary General Other (specify)		
State: CA District: 30			
SUBTOTAL of Disbursements This Page (optional		>	5000.00

ITEMIZED	EB (FEC Form 3X	Use sepa	arate schedule(s)		NUMBER: PAGE 108 / 115
	DISBURSEMENTS	for each	category of the Summary Page	(check only	7 one) 22
					or the purpose of soliciting contributions licit contributions from such committee
NAME OF C	OMMITTEE (In Full) College of Radiology Asso				
•	ast, First, Middle Initial) For Congress				Transaction ID: 30248194 Date of Disbursement
Mailing Addre	ess P.O. Box 15734				$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z & B \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Q & Q \\ Y & Z & O & Q & Q \end{bmatrix} \ \end{bmatrix}$
City Washingto	n	State DC	Zip Code 20003		Amount of Each Disbursement this Period
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	n Gillibrand	Salar and Salar	0010	Category/ Type	
Office Sough	X Senate President	Disbursement For: X Primary Other (spe	2010 General ecify) ▼		
•	District: ast, First, Middle Initial) For Congress				Transaction ID: 30251154 Date of Disbursement
Mailing Addre	ess P.O. Box 37091				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & G \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & G \end{smallmatrix} \end{bmatrix}^Y$
City Charlotte		State NC	Zip Code 28237		Amount of Each Disbursement this Period
Purpose of D	isbursement			011	1500.00
Candidate Na Rep. Sue V	ame Vilkins Myrick			Category/ Type	
Office Sough		Disbursement For: X Primary	2010 General		
Onice Sougr	Senate President	Other (spe	ecify) 🔻		
State: NC	President District: 09	Other (spe	ecify) 🔻		
State: NC Full Name (L	President	Other (spe	ecify)		Transaction ID: 30256844 Date of Disbursement
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State: NC Full Name (L Campaign Mailing Addre	President District: 09 ast, First, Middle Initial) for our Country 10 G Street NE Suite 710	Other (spe	Zip Code 20002		Date of Disbursement M 6 M / D 7 D / Y Y Y O 9 Y Amount of Each Disbursement this Perio
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	EMIZED DISBURSEMENTS	Detailed Summary Page	21b 22 X 23 24 25 27 28a 28b 28c 29 3
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) American College of Radiology Associatio	e and address of any political committ	
<u>V_</u>	Full Name (Last, First, Middle Initial) Yarmuth For Congress		Transaction ID: 30313033 Date of Disbursement
	Mailing Address 900 East Market Street Suite 100		0 6 M / D 1 7 / Y 2 0 0 9 Y
	City Louisville	State Zip Code KY 40202	Amount of Each Disbursement this Period
	Purpose of Disbursement Candidate Name Rep. John Yarmuth	Q1 Categ	ory/
	Office Sought: X House Disburse	ement For: 2010 Primary General Other (specify)	9
	Full Name (Last, First, Middle Initial) Friends Of Byron Dorgan Mailing Address PO Box 871		Transaction ID: 30313317 Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Amount of Each Disbursement this Period
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	Candidate Name Sen. Byron L. Dorgan	Categ Typ	•
	9 🗎	ement For: 2010 Primary General Other (specify)	
	Full Name (Last, First, Middle Initial) Rob Wittman For Congress		Transaction ID: 30440517 Date of Disbursement
	Mailing Address PO Box 999		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Montross	State Zip Code VA 22520	Amount of Each Disbursement this Period
	Purpose of Disbursement	01	<u> </u>
	Candidate Name Mr. Robert Wittman	Categ Typ	
	X	ement For: 2010 Primary General Other (specify)	
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American College of Radiology Associa	ion Political Action Committe	ee 	
Full Name (Last, First, Middle Initial) Kirkpatrick For Arizona Mailing Address PO Box 993			Transaction ID: 30440518 Date of Disbursement M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
City Prescott	State Zip Code AZ 86302		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2000.00
Candidate Name Rep. Ann Kirkpatrick		Category/ Type	
Office Sought: X House Senate President State: AZ District: 01	rsement For: 2010 X Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: 30446988
Davis For Congress/Friends Of Davis			Date of Disbursement
Mailing Address 5956 W. Race Avenue			$ \begin{bmatrix} M & M \\ 0 & 6 \end{bmatrix} & \begin{bmatrix} D & 2 & D \\ 2 & 2 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$
City Chicago	State Zip Code IL 60644		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	5000.00
Candidate Name Rep. Danny Davis		Category/ Type	
Office Sought: X House Senate President State: IL District: 07	rsement For: 2010 X Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Wyden For Senate			Transaction ID: 30446990 Date of Disbursement
Mailing Address PO Box 3498			$ \begin{bmatrix} 0 & 6 & M \\ 0 & 6 & M \end{bmatrix} \begin{bmatrix} 0 & 2 & 4 \\ 0 & 2 & 4 \end{bmatrix} \begin{bmatrix} 0 & 2 & 0 & 0 & 9 \\ 0 & 2 & 0 & 0 & 9 \end{bmatrix} $
City Portland	State Zip Code OR 97208		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	1500.00
Candidate Name Sen. Ron Wyden		Category/ Type	
X Senate President	rsement For: 2010 X Primary General Other (specify) ▼		
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	Mailing Address	Suite 100	el Street												
	City Louisville			State KY	Zip Code 40202				Amo	unt of	Each	Disbur			_
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	Candidate Name Rep. John Yar	muth					atego Type	•							
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	Mailing Address	76 Magnolia Te	rrace						0 6		2	5	2	0 ŏ 9)
	City Springfield			State MA	Zip Code 01108				Amo	unt of	Each	Disbur			_
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	Candidate Name Rep. Richard E	E. Neal					atego Type	•							
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	Mailing Address	P.O. Box 85123	32						0 ^M 6	M /	^D 2	2 3 /	YZ	0 0 9) Y
	City Mobile			State AL	Zip Code 36685				Amo	unt of	Each	Disbur	semer	t this F	Perio
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	Candidate Name Rep. Jo Bonne	er				Ca	atego Type	ory/							
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	Full Name (Last, F Friends Of Con	irst, Middle Initial) gressman George	e Miller						Date		burse	304 ement			Y
	Mailing Address	P.O. Box 5864							0 6		2	2 6	2	0 0 9)
	City Concord			state CA	Zip Code 94524				Amou	unt of	Each	Disbu		nt this F	
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	Candidate Name Rep. George Mi	ller					atego Type	•							
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	Candidate Name Rep. Thaddeus	McCotter				Ca	atego Type	ory/							
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Full Name (Last, First Committee for the	t, Middle Initial) Preservation of Capita	lism (CPC)					action ID: f Disburser		52	
Mailing Address	PO Box 65314					06	[/] 2	4 / Y	ž 0 ŏ 9	Υ
City Washington		State DC	Zip Code 20036			Amour	nt of Each [erioc
Purpose of Disburser	nent			-	11			2	2500.00	_
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City Prescott		State AR	Zip Code 71857			Amour	nt of Each I	Disburseme	ent this P	erio
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Candidate Name Rep. Michael Ross					egory/ /pe					
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Michael Burgess F									YY	Y
	PO Box 2334					06	[/] 3	Ö / Y	ž 0 ŏ 9	
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Mailing Address City Denton Purpose of Disburser				-	11	0 6		Disburseme		-
Mailing Address City Denton Purpose of Disburser Candidate Name Rep. Michael C. B	ment urgess, M.D.	TX	76202	Cate	11 egory/ /pe	0 6		Disburseme	ent this P	-
Mailing Address City Denton Purpose of Disburser Candidate Name Rep. Michael C. B Office Sought:	ment urgess, M.D. House Disburs		2010 General	Cate	egory/	0 6		Disburseme	ent this P	-

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		Detailed	Summary Page		27	Н	22 28a	X	23 28b	H	24 28c	\vdash	25 29	H	⊣	26 30b
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$\overline{\ }$	NAME OF COMMITTEE (In Full)															
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	Full Name (Last, First, Middle Initial)						Trans	acti	on ID	:	30478	840)			
	Synergy PAC						Date o									
	Mailing Address 29 Ruff Circle						0 ^M 6	2	o ŏ	9 ^Y						
	City Glastonbury	State CT	Zip Code 06033				Amou	nt o	f Each	ı D	isburse	mer	t this	Peri	iod	_
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	Brady For Congress						Date of					,000	,			
	Mailing Address P.O. Box 8277						0 ^M 6	М	/ D	1 6	6 /	2	o ŏ	9 ^Y		
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	Candidate Name Rep. Kevin Brady			Cateo Typ												
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SUBTOTAL of Disbursements This Page (optional)	•	6500.00
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State: TX

District: 08

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name	for each category of the Detailed Summary Page (check online) 21b 27 cents may not be sold or used by any person	22 23 24 25 26 28a 28b 28c X 29 30b for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Association		ancit continuations from such committee
Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 27025		Transaction ID: 30659628 Date of Disbursement M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code VA 23261-7025 001 Category/ Type	Amount of Each Disbursement this Period 575.56
Office Sought: House Disburser Senate President State: District:	**	Bank Fees

		•			575 56	
SUBTOTAL of Disbursements This Page (optional)					575.56	
			-			
TOTAL This Period (last page this line number only)	•				575.56	